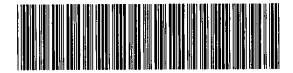
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DIVISION OF CORPORATIONS

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I200000000195

REFERENCE : 583291 7805227

AUTHORIZATION : Interpretable was considered as a constant of the con

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CONTACT PERSON: Courtney Williams -- EXT# 62935

EXAMINER:

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1.	Name of the limited liability company: FREEDOM MA	NAGEME	NT GROU	P LLC			
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(b))	Mailing address of limit			_
	1000 5th Street, Suite 200	_		(MIC. MAT DE LO.	<u> </u>		
	Miami Beach, FL 33139						
	1/11/2011		L1100000				
3.	Date of filing/registration in Florida	4.		Document number	•		
5. (a	Registered Agent and Registered Office shown on the records of C T CORPORATION SYSTEM Registered Office Address (MUST BE FLORIDA STREET) 1200 SOUTH PINE ISLAND ROAD Plantation , FI Corporation Service Company Enter name of NEW Registered Agent and/or NEW Registered 1201 Hays Street NEW Registered Office Address:	33324	ress:	-	TARREST HORD	15 APR -9 GHII: 28	
the chage age of the area of the area of the	Imited liability company is not organized under the law lange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited livere authorized by an affirmative vote of the members of ticles of organization or the operating agreement of the law later of a member of authorized representative of a member leby accept the appointment as registered agent and agricultures of all statutes relative to the proper and complete ligations of my position as registered agent as provided rely reflect a change in the registered office address, I is	ws of the S f the regist ability cor of the limi limited li	ered office npany. it is led liability com	and the business of the hereby confirmed or company or as other pany. Printed or typed name arcity. I further our	ffice of the that the characteristic production of signee	e register ange(s) ovided in	
notifie	ure of Registered Agent Corporation Service Company	BY:		Courtney W Asst. Vice Pr	illiams		

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 FILING FEE: \$25.00