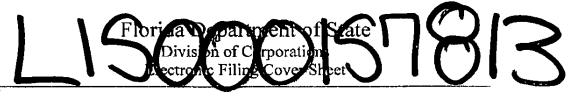
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D. SCOTT

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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. N	ame of the limited liability company: Oclem Holdin	g, LLC	
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(b)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
3. 5. (a		4.	Document number
(b)	Registered Agent and Registered Office shown on the records of the Florida Dept. of Stat Registered Office Address (MUST BE FLORIDA STREET ADDRESS) 2855 PGA Boulevard, #100		SECRET
	Klett Mesches & Johnson P I	33410 Office address	LED 22 PH 2: 41 23 PH 2: 41 MINITOR STATE USSEEL TLOPINA
	NEW Registered Office Address: 4400 PGA Boulevard, Suite 304		
	Palm Beach Gardens , FL	33410	
the chagent was/v the ar Sign I heroprovisite of to me	limited 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 alure of a member of a member alure of a member alure of a member and accept the appointment as registered agent and agricultures of all statules relative to the proper and complete obligations of my position as registered agent as provide rely reflect a change in the registered office address, I seed in writing of this change.	the registere ability compart the limited limited limited Linda L	d office and the business office of the registered my, it is hereby confirmed that the change(s) liability company or as otherwise provided in ity company. Philbrick Printed or typed name of signce this capacity. I further agree to comply with the
Signat	rure of Registered Agent		

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