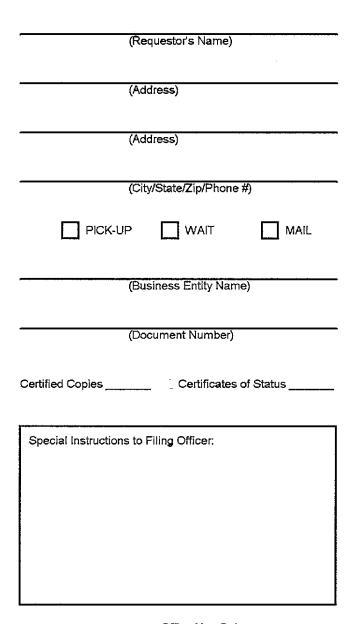
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Office Use Only



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Bay State Corporate Services, Inc. Six Beacon Street, Ste. 510 Boston, MA 02108 (617) 742-8484 Fax: (617) 742-8482

February 26, 2005

Enclosed you will find (2) Corporate Change of Agent filing(s) for FL

Subject name(s): CORPORATE INTEGRITY SERVICES LLC KNIGHTGUARDIAN LLC

Please file the attached Corporate filing(s) upon receipt. A check in the amount of \$70.00 is enclosed.

If there are any problems, please hold the filing and call our office immediately. Feel free to call collect at 617-742-8484.

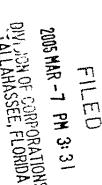
Upon completion, please return the evidence to our office by:

REGULAR MAIL, a self-addressed, stamped envelope is enclosed

Thank you in advance for your assistance.

Sincerely,

Suzanne Cryan



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

Pursuant to the provisions of sections 608.416 or 608.508, 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. The name of the limited lia	bility company is: C	ORPORATE INTEGRITY	SERVICES LLC
2. The mailing address of the limited liability company is: 14205 TELEGRAPH ROAD, STE 104			
WOODBRIDGE, VA 22192-4666	5		, = •
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2/10/1995	v21 . 1	L98000000122	
3. Date of filing/registration is	n Florida	4. Document	number
5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:			
INTRASTATE REGISTERED AGENT CORPORATION			
Name			
701 BRICKELL AVE., STE 3000			
Address			
MIAMI, FL 33131			_ 髮 萝丁
701 BRICKELL AVE., STE 3000 Address MIAMI, FL 33131 City, State and Zip			
6. The name and address of the new registered agent and/or office: NRAI Services, Inc. Name			
NRAI Services, Inc.			끈원 😀
Name Sali 3			
2731 Executive Park Drive, Suite 4			
Florida street address (P.O. Box NOT acceptable)			
We	ston	T_ 33331	
	City, Stat	e and Zip	
If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.			
(Signature of a member or authorized r	epresentative of a member)		
R. Patrick Keough, CEO and Pro (Printed or typed name of signee)			-
I hereby accept the appointm comply with the provisions of and I am familiar with and ac Chapter 608, F.S. Or, if this address, I hereby confirm that NRAI Services. Inc. (Signature of Registered Agent) Suzanne Cryan. Asst. Secretary		nt and agree to act in thi o the proper and comple of my position as register of to merely reflect a cho company has been notific	s capacity. I further agree to te performance of my duties, red agent as provided for in inge in the registered office red in writing of this change.
Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314			

INHS18(10/99) FILING FEE: \$25.00