198000000706

(Requestor's Name)
(Address)
(A) delice (A)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Dustanta Fulfu Nama)
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
,

Special Instructions to Filing Officer:
}
}
}
}
}
L

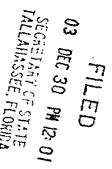
Office Use Only



900024782709

03 DEC 30 PH 3: 0







ACCOUNT NO. : 072100000032

REFERENCE : 352732

4719600

AUTHORIZATION :

COST LIMIT : \$ 25.00

ORDER DATE: December 9, 2003

ORDER TIME : 12:39 PM

ORDER NO. : 352732-015

CUSTOMER NO: 4719600

CUSTOMER: Ms. Andrea Eller

Bowne & Co., Inc.

11th Floor

345 Hudson Street

New York, NY 10014-4502

CHANGE OF AGENT

NAME: CASEVENTURE, L.C.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_ CERTIFIED COPY XX PLAIN STAMPED COPY

CONTACT PERSON: Carla Lohi -- EXT# 1132

EXAMINER:

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 liability company is: CASEVENTURE, L.C.
2. The mailing address of the limited liability company is: 5000 Sawgrass Village Circle,
Suite 21, Ponte Vedra Beach, FL 32082
05/29/1998 L98000000706
3. Date of filing/registration in Florida 4. Document number
5. The name of the registered agent and the registered office address as shown on the records state:
Xrehel, Gregory ≧⊞ 등 ७
Name 5000 Sawgrass Village Circle, Suite 21
Address Ponte Vedra Beach, FL 32082 City, State and Zip
City, State and Zip
6. The name and address of the new registered agent and/or office:
Corporation Service Company
Name
1201 Hays Street
Florida street address (P.O. Box NOT acceptable)
Tallahassee FL 32301
City, State 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 representative of a member)
Scott L. Spitzer
(Printed or typed name of signee)
I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change. (Signature of Registered Agent) Elva M. Shipkowski, Asst. V.P.

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

FILING FEE: \$25.00

INHS18(10/99)