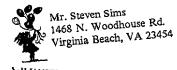
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Office Use Only

## CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1	(Corporation Name)		(Document #)	ener man y er av e ener e e e		<u>-</u> .
2	(Corporation Name)		(Document #)			
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NE	Profit Not for Profit		ENDMENTS  Amendment  Resignation of 1	R.A., Officer/I	Director $\sim$	
	Limited Liability Domestication Other		Change of Regi Dissolution/Wit Merger	stered Agent	48 5 M	nti
OTHER FILINGS		RE	REGISTRATION/QUALIFICATION 6/15			2/15
	Annual Report Fictitious Name		Foreign Limited Partner Reinstatement Trademark Other	ship		

Examiner's Initials

## 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: WICH LIFE, LIC.
2. The mailing address of the limited liability company is :
8001 Clarcona Occee Road, Orlando, FL 33818-1228
December 16, 1993 1,99000089025
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 of the Florida Department of State:
David E. Dreyer, Faq. Name
505 South Flagler Drive, Suite 1100
Address
West Palm Beach, FL 33401 City, State and Zip
6. The name and address of the new registered agent and/or office:
Thornton M. Benry, Req. Name
505 South Flagler Drive, Suite 1100
Florida street address (P.O. Box NOT acceptable)
West Palm Beach, FL 33401
City, State and Zip
If the limited liability company is not organized under the laws of the Stare 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)
Christina Sims (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 auties, 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) Thornton M. Henry  Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314
DHS IS (10/99) FILING FEE: \$25.00

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