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GRACE VENTURE PARTNERS  
SunTrust Center, Suite 1850  
200 South Orange Ave., Orlando, FL 32801

Address

City/State/Zip

Phone #

200006135032--6

-07/01/02--01093--011

\*\*\*\*\*25.00 \*\*\*\*\*25.00

Office Use Only

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

1. Grace Equity Partners LLC

(Corporation Name)

(Document #)

2.

(Corporation Name)

(Document #)

3.

(Corporation Name)

(Document #)

4.

(Corporation Name)

(Document #)

☐ Walk in

☐ Pick up time

☐ Mail out

☐ Will wait

☐ Photocopy

☐ Certified Copy

☐ Certificate of Status

**NEW FILINGS**

- ☐ Profit
- ☐ Not for Profit
- ☐ Limited Liability
- ☐ Domestication
- ☐ Other

**OTHER FILINGS**

- ☐ Annual Report
- ☐ Fictitious Name

**AMENDMENTS**

- ☐ Amendment
- ☐ Resignation of R.A., Officer/Director
- ☐ Change of Registered Agent
- ☐ Dissolution/Withdrawal
- ☐ Merger

**REGISTRATION/QUALIFICATION**

- ☐ Foreign
- ☐ Limited Partnership
- ☐ Reinstatement
- ☐ Trademark
- ☐ Other

02 JUL - 1 AM 10: 22  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

APPROVED  
AND  
FILED

Examiner's Initials

JB  
7-7-02

**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: Grace Equity Partners LLC
2. The mailing address of the limited liability company is : 200 South Orange Ave.  
Suite 1850, SunTrust Center, Orlando, FL 32801
3. Date of filing/registration in Florida 3/20/2000
4. Document number M 00000000523

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 Corp.  
Name  
701 Brickell Avenue, Suite 3000  
Address  
Miami, FL 33131  
City, State and Zip

6. The name and address of the new registered agent and/or office:

Edward P. Grace III  
Name  
200 South Orange Avenue, Suite 1850  
Florida street address (P.O. Box NOT acceptable)  
Orlando FL 32801  
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.

Steven Collins  
(Signature of a member or authorized representative of a member)

Steven Collins  
(Printed or typed name of signer)

*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]  
(Signature of Registered Agent)

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

APPROVED  
AND  
FILED  
02 JUL 19 10:22  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA