Florida Department of State

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENT SOLUTIONS INC

Account Number : I20100000062 Phone : (888)705-7274 Fax Number : (888)706-7274

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

11	Address.			
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LLC REGISTERED AGENT CHANGE INTER-RAIL TRANSPORT OF PALM CENTER, LLC

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COVER LETTER

	Registration Section Division of Corporations		
SUBJEC	Inter-Rail Transport of Palm C	enter, LLC	
SOBJEC		lame of Limited	Liability Company
Dear Sir	or Madam:		
The encl	osed Registered Agent/Registered (Office Change an	nd fee(s) are submitted for filing.
Please re	eturn all correspondence concerning	this matter to th	e following:
Lori Wha	alen		
	Name of Person		
Registere	ed Agent Solutions, Inc.		
	Firm/Company		
Corporat	e Center One, 5301 Southwest Pkwy, S	Ste 400	
	Address		
Austin, 1	TX 78735		
	City/State and Zip Cod	e	
E-1	mail address: (to be used for future	annual report no	tification)
For furth	ner information concerning this mat	ter, please call:	
Lori Wh	alen	888 at (705-7274
	Name of Person		Area Code & Daytime Telephone Number
	Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
	Enclosed is a check for the follow	ing amount:	
	S25 Filing Fee	۵	\$55 Filing Fee & Certified Copy
INHS18	(2/14)		

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.

. (a)	15400 CORPORATE ROAD SOUTH	(b) 115 LAWYERS ROW				
. (4)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ (")	Mail	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
	JUPITER, FL 33478	-	CENTREVI	ILLE, MD 21617		
	8/14/2003	ľ	M0300000273	32		
. (a)	Date of filing/registration in Florida TRAC - THE REGISTERED AGENT COMPANY	4.	Do	ocument number		
	Registered Agent and Registered Office shown on the records of t Registered Office Address					
	236 E.6th Avenue			20		
	Tallahassee	32303		2023 NU 9 Z 9 TTT		
(b)	Registered Agent Solutions, Inc.			29		
• 7	Enter name of NEW Registered Agent and/or NEW Registered	Office add	<u>ress</u> :	, . 	p	
	2894 Remington Green Ln.			: r	<u>.</u>	
	NEW Registered Office Address:		(つ ン		
	Ste. A					
	Tallahassee, FL_	32308				
hange gent w 'as/we	mited liability company is not organized under the law or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited liabre authorized by an affirmative vote of the members of cles of organization or the operating agreement of the land a Missister.	registered bility con f the limi imited lia	l office and th npany, it is he ted liability co ability compar	he business office of the regis ereby confirmed that the chan ompany or as otherwise prov- iny.	tered ge(s) ided in	
Sissan	Jaclyn Wright ure of a member or authorized representative of a member	Jaciy	n Wright	Authorized Pers	son	
	by accept the appointment as registered agent and agre				with the	

Signature of Registered Agent