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(((H11000186550 3)))



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JUL 22 2011

Electronic Filing Menu

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Help

H110001803505

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. Name of the limited liability company: SRS Holding, I	LC		_	
2. (a) Principal office address of limited liability company		3005 Breckinridge Blvd, # 240		
(Note: MUST BE STREET ADDRESS)	Duluth, Georgia 30096	<u> </u>	-	
(b) Mailing address of limited liability company:	3005 Breckinridge	3005 Breckinridge Blog #240		
(Note: MAY BE POST OFFICE BOX)	Duluth, Georgia 30096	-LAH ECRE II JU		
1/27/2004	M0400000364	ARY ASSE		
3. Date of filing/registration in Florida	4. Document number	<u> </u>	1	
5. (a) Registered Agent and Registered Office shown on		Dep Sta &		
Registered Agent: ;	NATIONAL CORPORATI	e research ltd	., IN	
Registered Office Address:	515 EAST PARK AVENU TALLAHASSEE FL 32301		<u>-</u>	
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEV</u> <u>NEW Registered Agent</u> :	W Registered Office addr	ress:	_	
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	1200 South Pine Island Roa	ıd,	_	
	Plantation	,FL <u>33324</u>	_	
If the limited liability company is not organized under the loonfirmed that after the change or changes are made, the Fl and the business office of the registered agent will be identified liability company, it is hereby confirmed that the change(s) of the members of the limited liability company or as other or the operating agreement of the limited liability company	lorida street address of the ical. Or, in the case of a F was/were authorized by a wise provided in the article	registered office lorida limited in affirmative vote		
Hugh Gauntt, Member				
Printed or typed name of signee :				
I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the prought I am familiar with and accept the obligations of my posthapter 608, F.S. Or, if this document is being filed to menual results and investigations of menual results. I hereby confirm that the limited liability company	gree to act in this capacity fper and complete perform sition as registered agent o rely reflect a change in the has been notified in writi	. I further agree to tance of my duties, as provided for in registered office ng of this change.	,	
Mark Williams, AVP, C T Corporation Division of Corporations, P.O. Box 63		4		

FILING FEE: \$25.00

INHS18 (05/08)