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REGISTERED AGENT CHANGE

THE MCKINLEY GROUP OF FLORIDA, LLC

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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. The McKinley Group Of Florida, LLC 1. Name of the limited liability company: 2. (a) Principal office address of limited liability company: One Independent Drive (Note: MUST BE STREET ADDRESS) Jacksonville FL 32202 (b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) 2/9/2004 M04000000534 3. Date of filing/registration in Florida Document number 5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State: Registered Agent: Corporation Service Company Registered Office Address: 1201 Hays Street Tallahassec FL 32301-2525 (b) Enter name of NEW Registered Agent and/or NEW Registered Office address: **NEW** Registered Agent: CT Corporation System 1200 South Pine Island Road **NEW** Registered Office Address: (MUST BE FLORIDA STREET ADDRESS) Plantation Ħ,FL 33324 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. /s/ Gregory D. Holland (Signature of a member or authorized representative of a member) Gregory D. Holland (Printed or typed name of signoe) 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.

CT Corporation System

Barbara A. Burke

Signature of Registered Agent)

Barbara A. Burke

Special Assistant Secretary Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00 INHS18 (05/08) FLOIS - DS/27/2008 C T System Online

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