## M0400000958

	(Requestor's Name)	
	(Address)	,
	(Address)	<u>.                                    </u>
	(City/State/Zip/Phone #	f)
PICK-L	P WAIT	MAIL
	(Business Entity Name	e)
	(Document Number)	
Certified Copies	Certificates o	of Status
Special Instruction	s to Filing Officer:	
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## US CorpWorks Inc.

.1638 Pennsylvania Street Denver, CO 80203 Michael Mirrione

Date: May 18, 2006

Ref: Daw Technologies, LLC	•		
Please file the attached Change of	Agent		
THANK YOU!!	•		
		•	
RoutineExpedite			
Special Instructions			
		06 FALL	
		FIL 06 MAÝ 22 PŠEUHETARY PALLANJASSEL	
		FILED 22 PM SEC, FL	
Return Via:		STATE OF THE PERSON	
	•	⊅''' ₽	
Fax: 303.393.8900 or E-Mail: mmirrione@usco	orpworks.com		
Federal Express #2163-4679	9-3 Priority Standard 2-Day		
xx Mail	US CorpWorks Inc.		
_x_To MeTo My Client:	1638 Pennsylvania Street		
	Denver, CO 80203 Attn: Mike Mirrione		

Voice: 303.393.8800 Toll-free: 888.967.5799 Fax: 303.393.8900 mmirrione@uscorpworks.com

## 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 limi	ted liability compan	y is: Daw Technologies, LLC	
2. The mailing address	of the limited liabili	ty company is: 1600 W 2200 S., S	uite 201,
Salt Lake City, UT 84119			
			· · · · · · · · · · · · · · · · · · ·
03/11/2004		M0400000958	
3. Date of filing/registra	ation in Florida	4. Document nu	mber
5. The name of the regis Florida Department o	tered agent and the	registered office address as shown	on the records of the
	CT Corporation Sy	stem	_
	- · · · · · · · · · · · · · · · · · · ·	Name	_
	1200 South Pine Is		_
		Address	
	Plantation, FL 333		
	•	City, State and Zip	SEL SEL
6. The name and address	s of the new register	ed agent and/or office:	HAY 22 I
	NRAI Services, Inc.		22 :
		Name	22 PM
	2731 Executive Par	rk Drive, Suite 4	LOS -
	Florida street ad	dress (P.O. Box NOT acceptable)	PH 1: 14 OF STATE E. FLORIDA
	Weston	FL 33331	_
	Ci	ty, State and Zip	
confirmed that after the and the business office of liability company, it is he members of the limit the operating agreement	change or changes a of the registered ager ereby confirmed tha ted liability compan of the limited liabil		of the registered office of a Florida limited ed by an affirmative vote of
(Signature of a member or author	orized representative of a n	nember)	
James C. Collings, Manag	ıer		
(Printed or typed name of signe			
I hereby accept the app comply with the provision and I am familiar with a Chapter 608, F.S. Or, if address, I hereby confir NRAI Services. Inc.  (Signature of Registered Agent)		ed agent and agree to act in this clative to the proper and complete pations of my position as registered ing filed to merely reflect a changability company has been notified	apacity. I further agree to berformance of my duties, agent as provided for in e in the registered office in writing of this change.
( G	•		

**FILING FEE: \$25.00** 

Michael Mirrione. Assistant Secretary
Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

INHS18(10/99)