

DOCUMENT# M05000001713

FILED
Apr 22, 2008
Secretary of State

New Principal Place of Business:**New Mailing Address:****Current Mailing Address:**

FEI Number: _____ **FEI Number Applied For ()** _____ **FEI Number Not Applicable (X)** _____ **Certificate of Status Desired ()** _____

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

MACFARLANE, ELLEN
201 NORTH FRANKLIN STREET SUITE 2000
TAMPA, FL 33602 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date _____

MANAGING MEMBERS/MANAGERS:

ADDITIONS/CHANGES:

Title: MGR () Delete
Name: MIMMS, MALON D TRUSTEE
Address: 85-A MILL STREET SUITE 100
City-St-Zip: ROSWELL, GA 30075

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: MALON D. MIMMS, AS TRUSTEE

MGR

04/22/2008

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date