## Division of Corporations Electronic Filing Cover Sheet

lorida Department of State

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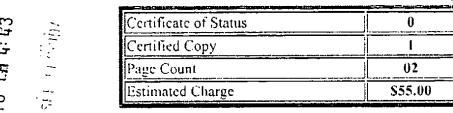
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## LLC REGISTERED AGENT CHANGE AWHR AMERICA'S WATER HEATER RENTALS, L.L.C.



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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 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

1. N	ame of the limited liability company; AWIR AMERICA	A'S W/	TER HEATE	R RENTALS, L.L.C.				
2. (a)	20.1 Campaig Center		(b) 804 Carnegie Center					
2. (a)	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BON)						
	Princeton, NJ 08540	Princeton, NJ 08540						
	4/4/2005	_	M05000001	753				
3. 5. (a	Date of filing/registration in Fforida CORPORATE CREATIONS NETWORK INC.	4.		Document number				
J. (U)	Registered Agent and Registered Office shown on the records of the 801 US HIGHWAY!	:	2021 DEC	RSI/AIC 336				
	Registered Office Address (MUST BE FLORIDA STREET A		)EC 16	EL TARB				
	NORTH PALM BEACH FL.		85 85 5 50 60 60					
(b)	C T Corporation System  Enter name of <u>NEW Registered Agent</u> und/or <u>NEW Registered</u>		AM 10: 17					
	NEW Registered Office Address:							
	1200 South Pine Island Road							
	Plantation FL.	33324						
the chagent was/withe ar	limited liability company is not organized under the law range or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lia were authorized by an affirmative vote of the members o ticles of organization or the operating agreement of the	the reg ibility f the li	gistered office company, it is mited liability	and the business office s hereby confirmed that y company or as otherwi	of the the cla	registered inge(s)		
-	ature of a member or authorized representative of a member	St	phanie Mitche	II, Authorized Person				
I here provis the of to me notifie By:	why accept the appointment as registered agent and agravious of all statutes relative to the proper and complete obligations of my position as registered agent is provided rely reflect a change in the registered agent is provided in writing of this change of the chang	ee 10 a perfor l for in lereby	et in this cape mance of my ( Chapter 605 confirm that	Printed or typed name of signetive. I further agree to duties, and I am familian F.S. Or, if this document limited liability comp	compl	y with the and accept eing filed as heen		

Division of Corporations • P.O. Box 6327 • Tallahassee, Fl. 32314 FILING FEE: \$25.00