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Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (954)208-0845

Fax Number : (614)573-3996

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LLC REGISTERED AGENT CHANGE SAFEMARK HOLDINGS, 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 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.

| 2. (a) | | 1 | (b) | | |
|--|--|---|---|--|--|
| (u) | Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) | | | Mailing address of limited liability company: (Note: MAY RE POST OFFICE BOX) | |
| | | | | Sandlake Road, Ste 800 | |
| | ORLANDO, FL 32809 ORLAN | | | OO, FL 32809 | |
| | 04/20/2005 | | M0500000 | 2061 | |
| 3. | Date of filing/registration in Florida | — 4. | | Document number | |
| 5. (a) | CORPORATION SERVICE COMPANY | | | | |
| (u) | Registered Agent and Registered Office shown on the records 1201 HAYS STREET | of the Flori | da Dept, of Sta | ate: | |
| | Registered Office Address | THE THE THE | | | |
| | TALLAHASSEE, I | L_32301 | | 2 HOV 14 P | |
| (b) | C T Corporation System | | | | |
| | Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Register</u> | ed Office n | ddress: | FM 2: 10 | |
| | NEW Registered Office Address: | | | | |
| | 1200 South Pine Island Road | | | _ | |
| | Plantation, I | FL_33324 | | _ | |
| he cha igent v was/we he arti | imited liability company is not organized under the lange or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited are authorized by an affirmative vote of the member icles of organization or the operating agreement of the contractions. | of the reg liability s of the li | gistered offic company, it mited liabil | ce and the business office of the registered is hereby confirmed that the change(s) ity company or as otherwise provided in | |
| B | ryan Busby the of a member ordinhorized representative of a member | Br | yan BUSBY | | |
| I here provisa the obt | Whe of a member of authorized representative of a member by accept the appointment as registered agent and clions of all statutes relative to the proper and completing at long of my position as registered agent as provied reflect a change in the registered office address, of in writing of this change. C. T. Corporation System | igree to o le perfor ded for it I hereby | mance of my Chapter 60 confirm tha | Printed or typed name of signee spacity. I further agree to comply with the values, and I am familiar with and accept 05, F.S. Or, if this document is being filed at the limited liability company has been or Mineer I Assistant Secretary | |