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Account Name : NATIONAL CORPORATE RESEARCH, LTD.

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statrép@nationalcorp.com. Email Address:

REGISTERED AGENT CHANGE PORT INDUSTRIAL, LLC

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EXAMINER

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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.

| 1. Name of the limited liability company: | PORT INDUSTRIAL, LLC | | | |
|---|--|---|--|--|
| 2. (a) Principal office address of limited liability company | 4550 Atwater Court | | | |
| (Note: MUST BE STREET ADDRESS) | Buford 804 | GA 30518 | | |
| (b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) | виога | | | |
| 12/28/2005 3. Date of filing/registration in Florida | M05000007092 | | | |
| J. Dute of manginegradation in Francis | 4. Document humber | | | |
| 5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State: Registered Agent: Registered Office Address: 9830 HIGHWAY 2301 | | | | |
| Registered Agent: | LOWY, ROBERT L | | | |
| Registered Office Address: | 9830 HIGHWAY 2301 | | | |
| | Youngatown | FL 12466-2752 | | |
| (b) Enter name of NEW Registered Agent and/or NEW Registered Office address: NEW Registered Agent: National Corporate Research, Ltd., Inc. | | | | |
| NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS) | . 515 East Park Avenue | | | |
| | Talishassee | FL 32301 | | |
| If the limited liability company is not organized under the lathat after the change or changes are made, the Florida street office of the registered agent will be identical. Or, in the cashereby confirmed that the change(s) was/were authorized by liability company or as otherwise provided in the articles of limited liability company. (Signature of a member or authorized representative of a member) (Frinted or typethnume of signes) I hereby accept the appointment as registered agent and age comply with the provisions of all statutes relative to the propant anniliar with and accept the obligations of my position of F.S. Or, if this document is being filed to merely reflect a cheory methat the limited liability company has been notified to the propant of Registered Agent) [Signature of Registered Agent] | address of the registered office of a Florida limited liabilit is on affirmative vote of the morganization or the operating | ice and the business by company, it is embers of the limited g agreement of the | | |
| Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00 | | | | |

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