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To:

Division of Corporations

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: (850)617-6380

From:

Account Name

: C T CORPORATION SYSTEM

Account Number : FCA000000023

Phone

: (850)222-1092

Fax Number

: (850)878~5926



REGISTERED AGENT CHANGE

EXT OWNER LLC

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D. BRUCE

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STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisio liability company submit agent, or both, in the Stat	s the following states	16 or 608.50 ment in order	8, Florida Statutes to change its regi	i, the undersign stered office or	ed lin regist	nited tered
1. The name of the limits	d liability company i	is: EXT Owner	LLC			·
2. The mailing address o	f the limited liability	company is:				 '
250 PARKCENTER BLVD. 1	P.O. BOX 20 BOISE ID	83726				,
05/31/2006			M06000002972			
3. Date of filing/registrat	ion in Florida		4. Document nur	nber		
5. The name of the register Florida Department of	ered agent and the rep State:	gistered office	address as shown	on the records o	f the	
· · · · · · · · · · · · · · · · · · ·	CORPORATION SERV	VICE COMPAN	Y			
		Name		, 1		
	1201 HAYS STREET			ALSE L	80	
•	Address			CRE	JAN	
	TALLAHASSEE FL 32301-2525 US			HAS	Z	CHARACTER OF THE PERSON AND PERSO
	Cit	ty, State and 2	71b	SS	5	
6. The name and address	of the new registered	l agent and/or	office:		¥	T
C T Corporation System				STATE	ੜ	para.
Name 1200 South Pine Island Road					25	dam.
	Florida street addr			₽		
	Plantation	FL	33324			
•	City	State and Zi	p			
If the limited liability conconfirmed that after the cand the business office of liability company, it is he of the members of the lir or the operating agreement (Signature of a member or author AUL G. HO	hange or changes are f the registered agent treby confirmed that to nited liability compan at of the limited liabil	made, the Fl. will be identi the change(s) ny or as other lity company.	orida street address cal. Or, in the case was/were authorize	of the registered of a Florida limed by an affirmat	d offic ited tive vo	ote
Printed or typed name of signes	BNATORY	 _				
I hereby accept the appo- comply with the provision and I am familiar with an Chapter 608, F.S. Or, if i address, I hereby confirm	intment as registered is of all statutes relat d accept the obligation into the limited liable proprion System.			spacity. I furthes erformance of m igent as provide in the registere writing of this	r agre iy duti d for id offic chang	le lo les, in ce je.
(Rignature of Registered Agents)	<u> </u>		R. Dindyal			
,	n of Corporations, l FILI	VICE P P.O. Box 632 NG FEE: \$2:		32314		
INHS18 (8/05)						

01/58/5008 10:53 8205577615

FLD13 - 09/09/2003 C T System Citilise