M06000006682

(Requestor's Name)						
(Address)						
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(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
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EXAMINER



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SECRETARY OF STATE
FALLAHASSEE, FI ORIO

B. KOHR

APR - 8 2008

EVAMINER



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TION SERVICE COMPAN	γ.					
	ACCOUNT NO.	:	07210000	00032		
	REFERENCE	:	514454	7466685		
	AUTHORIZATION	0	Kalan	ر · و	4.0	
	COST LIMIT		\$ 25.00		OR APR	7
ORDER DATE :	April 3, 2008				457	1
ORDER TIME :	9:31 AM				SEE. FLOR	,
ORDER NO. :	514454-130				OR OR	2
CUSTOMER NO:	7466685				20,	
	CHANGE OF A	AGEN	<u>T</u>			
NAME:	HRAL, LLC					

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

XX PLAIN STAMPED COPY

CONTACT PERSON: Doreen Wallace

EXAMINER'S INITIALS:

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. The name of the limited liability company is: HRAL, LLC

2. The mailing address of the limited liability company is: 23 Walker Avenue Baltimore, MD 21208 M06000006682

3. Date of filing/registration in Florida

12/04/2006

4. Document number

5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

> C T Corporation System Name 1200 South Pine Island Road Address

Plantation, FL 33324 City, State and Zip

6. The name and address of the new registered agent and/or office:

Corporation Service Company

Name 1201 Hays Street

Florida street address (P.O. Box NOT acceptable)

32301

Tallahassee City, State and Zip

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

(Signature of a number or apthorized representative of a member)

Kathy L. Yetter, Authorized Person

(Printed or typed name of signee)

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

(Signalure of Registered Agent) Keyna Etter, Asst. Secretary

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