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Division of Corporations

Fax Number : (850)617-6383

From:

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J. BRYAN

MAR 25 2009

EXAMINER

002 Fax Server

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BUTH 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:	ETS, LLC	·			
2. (a) Principal office address of limited li- (Note: MUST BE STREET ADDI	ability company: RESS)	7445 Company Dr Indianapolis, IN 40	ive 5237		
(h) Mailing address of limited liability of (Note: MAY BE POST OFFICE)	company: BOX)	7445 Company Dr Indianapolis, IN 40	ive 5237	5 5 5 5 7 8	
03/06/2007	****	M07000001312		10 MAR 24 AM	
3. Date of filing/registration in Florida	4	Document number	er ·	Fo Z	
5. (a) Registered Agent and Registered O Registered Agent:		ne records of the Flo C T Corporation Sy		8: 58	
Registered Office Address:		1200 South Pine Ist Plantation, FL 3332	and Road 4		
(b) Enter name of NEW Registered Ag NEW Registered Agent:			address:		
NEW Registered Office Address; (MUST BE FLORIDA STREET A	DDRESS)	1201 Hays Street			
(MOST DE LEGICEM STREET MARKESSY		Tallahassee	asseeFL 32301		
If the limited liability company is not organ that after the change or changes are made, to office of the registered agent will be identic hereby confirmed that the change(s) was/we liability company or as otherwise provided limited liability company. (Signature of a member or suthorized representative of a removed and a supplementations)	he Florida street al. Or, in the cases authorized by in the articles of	address of the regis se of a Florida limite an affirmative vote	tered office and the ed liability company of the members of :	business , it is the limited	
Blanca Lozada, Authorized Person (Printed or typed name of signee)					
I hereby accept the appointment as register comply with the provisions of all statutes re am familiar with and accept the obligations F.S. Or, if this document is being filed to me confurn that the limited liability company he Corporation Survey Company By:	red agent and ug lative to the prof of my position a erely reflect a cl as been notified a	ree to act in this cap per and complete pe s registered agent a cange in the register in writing of this che	pacity. I further agr rformance of my du is provided for in CF ed office address, I unge	ee to tics, and l iapier 608, hêreby	
(Signature of Registered Agent) Elizabeth A. Dawson, Asst. Vice Presid Division of Corporat	ent ions, P.O. Box 6 FILING FEE:		FL 32314		

INHS18 (05/08)