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DIVISION OF CORPORATION

B. KOHR

JUN 3 0 2009

EXAMINER



CORPORATION SERVICE COMPANY.

ACCOUNT NO. : I2000000195

REFERENCE: 049969 4330256

AUTHORIZATION :

COST LIMIT

ORDER DATE: June 29, 2009

ORDER TIME : 11:14 AM

ORDER NO. : 049969-005

CUSTOMER NO: 4330256

CHANGE OF AGENT

NAME: SIERRA EVERGLADES INVESTMENTS,

LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

___ CERTIFIED COPY XX PLAIN STAMPED COPY

CONTACT PERSON: Carina L. Dunlap

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. Name of the limited liability company: SIERRA EV	VERGLADES INVESTMENTS, LLC
2. (a) Principal office address of limited liability compan (Note: MUST BE STREET ADDRESS)	y: 1001 College Court New Bern, NC 28562
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	- July 29
04/24/2007	M07000002348
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown on	the records of the Florida Dept. of State:
Registered Agent:	C T Corporation System
Registered Office Address:	1200 South Pine Island Road Plantation, FL 33324
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NE</u> <u>NEW</u> Registered Agent:	W Registered Office address: Corporation Service Company
NEW Registered Office Address:	1201 Hays Street
(MUST BE FLORIDA STREET ADDRESS)	Tallahassee ,FL 32301
If the limited liability company is not organized under the that after the change or changes are made, the Florida stree office of the registered agent will be identical. Or, in the chereby confirmed that the change(s) was/were authorized liability company of as otherwise provided in the articles of limited liability company.	at address of the registered office and the business
(Signature of a member)	-
J. Troy Smith, Jr. Authorized Representative (Printed or typed name of signee)	
I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the prain familiar with and accept the obligations of my position F.S. Or, if this document is being filed to merely reflect a confirm that the limited liability company has been notified Corporation Service Company	

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

INHS18 (05/08)