M07000002400

(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificate	s of Status
Special Instructions to	Elling Officer	
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DEPART OF CERPORATION

MISSION OF CERPORATION



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ACCOUNT N	NO. : 072100000032
REFEREN	NCE : 915425 5024449
AUTHORIZATI	ON Spullelenan PSE 3
COST LIM	
ORDER DATE : May 23, 2007	SSEE, FLOR
ORDER TIME : 4:50 PM	SIA ELOR
ORDER NO. : 915425-005	TE
CUSTOMER NO: 5024449	
CHANGE CONTINUE ORLANDO AS	SSETS ACQUISITION LLC
PLEASE RETURN THE FOLLOWING CERTIFIED COPY XX PLAIN STAMPED COPY	G AS PROOF OF FILING:
CONTACT PERSON: Cindy Harr	ris
	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: Orlando Assets Acquisition LLC
2. The mailing address of the limited liability company is: 399 Park Avenue, 8th Floor,
New York, NY 10022
April 26, 2007 3. Date of filing/registration in Florida M0700002400 4. Document number
5. The name of the registered agent and the registered office address as shown on the receids of the Florida Department of State:
Capitol Corporate Services, Inc. Name 155 Office Plaza Dr., Suite A Address Tallahassee, FL 32301 City, State and Zip 6. The name and address of the new registered agent and/or office:
6. The name and address of the new registered agent and/or office:
Name 1201 Havs Street Florida street address (P.O. Box NOT acceptable)
Tallahassee FL 32301 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 member or authorized representative of a member)
Aarun J. Guth, Authorized Signatory (Printed on typed name of signeo)
Thereby 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 auties, 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.
(Signafure of Registered Agent) Cynthia L. Harris Asst. Vice President

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