

M07000004828

Florida Department of State
Division of Corporations
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To: Division of Corporations
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From: Account Name : C T CORPORATION SYSTEM
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FILED
09 MAY 29 AM 8:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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REGISTERED AGENT CHANGE

PEARL CARROLL & ASSOCIATES LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$35.00

S. HAWKES
MAY 29 2009
EXAMINER

\$ 25.00

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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: Pearl Carroll & Associates LLC

2. (a) Principal office address of limited liability company: _____

(Note: **MUST BE STREET ADDRESS**)

12 CORNELL ROAD
LATHAM NY 12110

(b) Mailing address of limited liability company: _____

(Note: **MAY BE POST OFFICE BOX**)

12 CORNELL ROAD
LATHAM NY 12110

08/09/2007

3. Date of filing/registration in Florida

M07000004828

4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Agent: CORPORATION SERVICE COMPANY

Registered Office Address: 1201 HAYS STREET
TALLAHASSEE FL 32301-2525

(b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

NEW Registered Agent: C T Corporation System

NEW Registered Office Address: 1200 South Pine Island Road

(MUST BE FLORIDA STREET ADDRESS) Plantation, FL 33324

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.

Stacia Taylor
Signature of a member or authorized representative of a member

Stacia Taylor, Attorney in Fact

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.

By: C T Corporation System
Signature of Registered Agent Samantha Jones

Samantha Jones
Assistant Secretary

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

FILING FEE: \$25.00

INHS18 (05/08)

POWER OF ATTORNEY

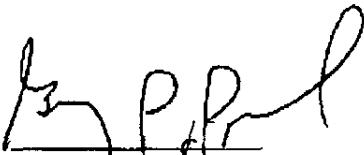
NOTICE IS HEREBY GIVEN THAT Gary P. Pearl, Officer of Pearl & Associates, ("the Corporation"), a corporation incorporated under the laws of Illinois and all subsidiary entities do hereby appoint Stacia Taylor and Laura Broderick as attorney-in-fact for the Corporation and for the subsidiary entities to act for the Corporation and for the subsidiary entities and in the name of the Corporation and of the subsidiary entities for the limited purposes authorized herein.

The Corporation and the subsidiary entities, having taken all necessary steps to authorize the changes, hereby grants its attorney-in-fact the power to execute the documents necessary to change the Corporation's and the subsidiary entities' registered agent and registered office, or the agent and office of similar import, in any state.

In the execution of any documents necessary for the purposes set forth herein Stacia Taylor shall exercise the power of Vice President, and Laura Broderick shall exercise the power of Secretary.

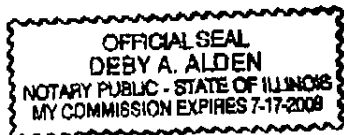
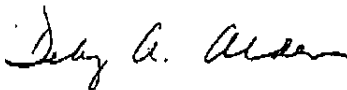
This Power of Attorney expires when revoked by any officer of Pearl & Associates.

IN WITNESS WHEREOF the undersigned has executed this Power of Attorney on this _____ day of April, 2009.



Name, Title Gary P. Pearl, President
Pearl & Associates

Subscribed and sworn to before me this 26th day of May, 2009



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09 MAY 29 AM 8:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Subsidiaries of
Pearl & Associates

Pearl & Associates, Ltd.
Pearl Carroll & Associates, LLC
Pearl Insurance Group, LLC
Pearl Technology Corporation

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