M08000001715

Florida Department of State
Division of Corporations
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Account Name : EDWARDS WILDMAN PALMER LLP
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LLC REGISTERED AGENT CHANGE
CGW MOLA, LLC

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N. Culligan JAN - 3 2012

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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: CGW MOLA, LLC

2. (a) Principal office address of limited liability company: c/o Goodrich, LLC

(*Note: MUST BE STREET ADDRESS*) 525 Okeechobee Blvd., Ste. 1000
West Palm Beach FL 33401

(b) Mailing address of limited liability company: c/o Goodrich, LLC

(*Note: MAY BE POST OFFICE BOX*) 525 Okeechobee Blvd., Ste. 1000
West Palm Beach FL 33401

3. Date of filing/registration in Florida: 04/09/2008

4. Document number: M08000001715

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

Registered Agent: Angell Corporate Services, Inc.

Registered Office Address: 525 Okeechobee Blvd., Ste. 1600
West Palm Beach FL 33401

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

NEW Registered Agent: NRAI Services, Inc.

NEW Registered Office Address: 515 East Park Avenue
(*MUST BE FLORIDA STREET ADDRESS*)
Tallahassee, FL 32301

If the limited liability company is incorporated under the laws of the State of Florida, it is hereby confirmed that after the change or changes contained herein the Florida street address of its registered office and the address of its registered agent will be identical. If, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was 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 member or authorized representative or manager

Stanley L. Clark, Manager
Typed or printed name of signer

Having agreed to the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to proper and complete performance of my duties, and I hereby accept the appointment as registered agent and agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties.

Signature of Registered Agent

Suzanne T. Cryan Asst. Sec.

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

REV 07/08