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EAGIL LIFE SETTLEMENTS, LLC

TYPE OF FILING: CHANGE OF AGENT

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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: EAGI	L LIFE SETTLEMENTS, LLC
2. (a) Principal office address of limited liability company	y: 50 Tice Boulevard
(Note: MUST BE STREET ADDRESS)	Woodcliff Lake, NJ 07677
(b) Mailing address of limited liability company:	50 Tice Boulevard
(Note: MAY BE POST OFFICE BOX)	Woodcliff Lake, NJ 07677
July 8, 2008	M08000003190
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:	Corporation Service Company
Registered Office Address:	1201 Hays Street SS N N N
	Tallahassee, Florida 32301
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NE</u>	W Registered Office address 9
NEW Registered Agent:	National Corporate Research, Ltd., Inc.
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	155 Office Plaza Drive
	TallahasseeFL_32301
If the limited liability company is not organized under the confirmed that after the change or changes are made, the F and the business office of the registered agent will be ident liability company, it is hereby confirmed that the change(s) of the members of the limited liability company or as other or the operating agreement of the limited liability company	lorida street address of the registered office ical. Or, in the case of a Florida limited was/were authorized by an affirmative vote
Signature of a member or authorized representative of a member Guy E Runyon Managing Member	
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 proud I am familiar with and accept the obligations of my po Chapter 608, F.S. Or, if this document is being filed to me address, I hereby confirm that the limited liability company	gree to act in this capacity. I further agree to oper and complete performance of my duties, sition as registered agent as provided for in rely reflect a change in the registered office y has been notified in writing of this change.
Lucy Rose, Assistant Secret Division of Corporations, P.O. Box 63 FILING FEE: \$2	27, Tallahassee, FL 32314