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EXAMINER

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 698.416 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: GORMAN EMPLO	DYBE GROUP 5, LLC				
2. (a) Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	200 NORTH MAIN STREET OREGON WI 53575				
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	200 NORTH MAIN STREET OREGON WI 53575				
12/21/2011 3. Date of filing/registration in Florida 4.	M11000006398 Document number				
5. (a) Registered Agent and Registered Office shown on the	ne records of the Florida Dept. of State:				
Registered Agent:	CORPORATION SERVICE COMPANY				
Registered Office Address:	1201 HAYS STREET TALLAHASSEE FL 32301				
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Office address</u> : NEW Registered Agent: CT Composition System					
<u>NEW Registered Office Address:</u> (MUST BE FLORIDA STREET ADDRESS)	1200 South Pine Island Road				
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. Joyce Whetrich, Corporate Secretary, Gorman & Company, Inc. 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 508, 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: CT Corporation System Onnie Bruan Division of Corporations, P.O. BSS 5200 32314 FILING FEE: \$25.00					
INHS18 (05/08)					

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