Division of Corporations Public Access System

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Account Mumber : PCA000000023 Phone : (850)222-1092

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REGISTERED AGENT CHANGE

DAY & ZIMMERMANN LLC L.C.

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Sectionia Historia

J. BRYAN MAY 1 8 2004

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

Pursuant to the provision liability company submit agent, or both, in the State	ns of sections 600 s the following sta te of Florida.	8.416 or 608.508 stement in order	, Florida Statutes, th to change its register	ie undersigned limited ed office or registered
1. The name of the limit				
2. The mailing address o	f the limited liabili	ity company is : _	1818 Market Street Philac	,
4/4/94			M94006000023	
3. Date of filing/registrat	ion in Florida		4. Document number	r
4/4/94 3. Date of filing/registrat 5. The name of the registrat Florida Department of	ered agent and the State:	ragistared office	address as shown on t	he records of the
	Corporation Service	Conveny		The state of the s
		Name		
	1201 Hays Street	Address		
	Tellahassee, Florida			100 m
		City, State and Zi	,	- 'Y
6. The name and address	of the new register	red agent and/or o	ffice:	he records of the
•	C T Corporation Syst	iem		7
		Name		
· ·	1200 South Pine lelet			
•	Florida street ad	dress (P.O. Box N	(OT acceptable)	
	Plantation	FL 33324		
	Ci	ty, State and Zip		
If the limited liability come confirmed that after the chand the business office of liability company, it is her the members of the limited the operating agreement of the limited the operating agreement of liability company.	tange or changes at the registered ager they confirmed that d liability company f the limited liabili	re made, the Flori at will be identica t the change(s) wi y or as otherwise p ity company.	da street address of th l. Ot, in the case of a se/were authorized by	te registered office Florida limited an affirmative vote of
Maria T. Chambers - Attention (Printed or typed name of signes)	1-la-fact			-
I hereby accept the appoint comply with the provisions and I am familiar with and Chapter 608, F.S. Or, if the address, I hereby confirm CT Corporation System	dacaept the obligation is being the limited liament in the limited liament in the limited liament in the liamen	thons of my positivity filed to merely bility company has STEVEN P. ZIN	r and complete perform on as registered agent oreflect a change in the is been notified in write AMFR	ty. I further agree to mance of my duties, as provided for in a registered office ting of this change.
(Signature of Registere d Agent)		HAL ASSISTANT		
Division	1 of Corporations	, P.O. Box 6327,	Tallahassee, FL 323	14
D4HS1\$(10/09)	Fi	LING FEE: \$25.	00	
FLOID-WITTH C TStemen Dallace				