

ACCOUNT NO.

072100000032

REFERENCE

922832

4311863

AUTHORIZATION

COST LIMIT :

\$ 25.00

ORDER DATE: December 7, 2000

ORDER TIME : 10:15 AM

ORDER NO. : 922832-020

CUSTOMER NO: 4311863

CUSTOMER: Ms. Kathleen Kirchner

Blank Rome Comisky & Mccauley

One Logan Square, 3rd Floor

18th And Cherry Street

Philadelphia, PA 19103-6998

CHANGE OF AGENT

NAME: REGULUS AMERICA LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

PLAIN STAMPED COPY

CONTACT PERSON: Tamara Odom

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. The name of the limit	ed liability company is	S: REGULUS A	MERICA, LLC	
2. The mailing address o	f the limited liability of	company is: _2	2 Internation	nal Plaza, Suite 650,
Philadelphia, PA	19113			
10/15/1998			M98000001187	7
3. Date of filing/registrat	ion in Florida	•	4. Document n	umber
5. The name of the register Florida Department of	ered agent and the reg State:	istered office a	ddress as show	n on the records of the
	CT Cor	poration Sys	tem	
	1201 Hays Street			
Address				
Tallahassee, FL 32301-2525				JAN -2 CAETARY LAHASSE
City, State and Zip				
6. The name and address of the new registered agent and/or office:				AMII: 27 Y OF STATE SEE, FLORIDA
	Corporation	on Service Co	ompany	
		Name		21 Rin 21
	1201	Hays Street		→
	Florida street addre	ss (P.O. Box N	OT acceptable)
	Tallahassee		32301	
	City,	State and Zip		
If the limited liability conconfirmed that after the chand the business office of liability company, it is here the members of the limited the operating agreement of the limited that the operating agreement of the limited that the operating agreement of a member or authority of a member or authority of the liability of the liab	the registered agent we reby confirmed that the diability company or of the limited liability of	nade, the Floridation in the identical echange(s) was otherwise prompany.	da street addres	Florida, it is hereby s of the registered office se of a Florida limited zed by an affirmative vote of articles of organization or
Jeffrey Theisen, S	·	·		-
(Printed or typed name of signee)	donotary a result	11 01		Ī.
I hereby accept the appoint the comply with the provision, and I am familiar with and Chapter 608, F.S. Or, if the address, I hereby confirm	ntment as registered as of all statutes relatived accept the obligation his document is being that the limited liabili	igent and agree be to the proper ns of my position filed to merely ty company ha	e to act in this of and complete on as registered reflect a chang s been notified	capacity. I further agree to performance of my duties, lagent as provided for in ge in the registered office in writing of this change.
(Signature of Registered Agent)	Carol K. Dollar	ASSLVP		₹
Divisio	n of Corporations. P		Tallahassee R	T. 32314

FILING FEE: \$25.00

INHS18(10/99)