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National Service Information, Inc. www.nsii.net

To whom it may concern:

Please file the enclosed change of agent documents. Please return the stamped received copies to the address provided below:

NSI 145 Baker Street Marion, OH 43301 Attn: Travis Pinkstaff

Should you have any questions please fee free to contact me directly at 800 235 0337 ext. 113. Thank you for your time.

Best Regards,

Travis Pinkstaff
National Service Information

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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. The name of the limited liability	company is: K98 SE	NIOR L.L.C.	<u>.</u>
2. The mailing address of the limit			
501 S FOURTH AVE SUIT 140 LOUIS	SVILLE KY 40202		
01/07/1999		M9900000024	:
3. Date of filing/registration in Flo	rida	4. Document num	ber
5. The name of the registered agent Florida Department of State:	and the registered off	ice address as shown or	n the records of the
•	RPORATION SYSTEM		
	Name		•
1200 SC	AD GA	•	
	Address		•
PLANTA		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
	City, State an	d Zip	- '유 (HA)
6. The name and address of the nev	v registered agent and	or office:	NON EQ
NRAI Se	vices, Inc.		26 26
71101100	Name	· · · · · · · · · · · · · · · · · · ·	موجي بسور
526 E. Pa	ark Avenue		
Florida	street address (P.O. B	ox NOT acceptable)	6: 10 6: 10
Tallahass	see FL 32	301	She
	City, State and	Zip	
If the limited liability company is reconfirmed that after the change or and the business office of the regis liability company, it is hereby confithe members of the limited liability the operating agreement of the limited liability the limited liability the limited liability the limited liability agreement of the limited liability the limited liability the limited liability the limited liability agreement of the limited liability the limited liability the limited liability agreement limited liability agreement liability agreement liability agreement liability agreement	changes are made, the tered agent will be ide irmed that the change company or as otherwall ted liability company.	Florida street address on tical. Or, in the case on s) was/were authorized	f the registered office of a Florida limited by an affirmative vote of
CARMIL Grandine H	,		: :-
I hereby accept the appointment a comply with the provisions of all stand I am familiar with and accept Chapter 608, F.S. Or, if this document address I hereby confirm that the standard confirmation is the standard confirmation that the standard confirmation confirmation that the standard confirmation confirmation confirmation that the standard confirmation confirmat	s registered agent and atures relative to the plue obligations of my present is being filed to nimited liability compa	agree to act in this cap roper and complete per osition as registered as perely reflect a change in my has been notified in	acity. I further agree to formance of my duties, gent as provided for in the registered office writing of this change.

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

FILING FEE: \$25.00

INHS18(10/99)