ª M99000000/63

GECGROUP, LLC GLOBAL ENTITY CONSULTING					
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SECRETARY OF STATE
TALLAHASSEE, FI ORIDA

M99-163

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.

	ŭ	070-1144	=		
1. The name of the limit	ed liability compa	any is: STREAMLIN	E HOLDING, LLC	·	
2. The mailing address of Maples	of the limited liab	ility company is: 2	291 J & C Blvd		
Samp a, FL 34109	·	· <u></u>			
02/04/1999			M99000000163		
3. Date of filing/registration in Florida			4. Document number		
5. The name of the regist Florida Department of	ered agent and the State:	e registered office a	ddress as shown on	the records of the	
	C T Corporation				
		Name			
1200 South Pine Island Road			4. 2		
		Address		SEC 30	
	Plantation, FL 33	3324 City, State and Zir			
		City, State and Zip)	- T	
6. The name and address	of the new regist	ered agent and/or of	ffice:	2006 JUL 12 PM 1: 13 SECRETARY OF STATE TALLAHASSEE, FLORID	
	NRAI Services, Ir	nc.		TO X	
	0704 Formation B	Name		器 :	
	•	Park Drive, Suite 4		St. O	
	Florida street a	address (P.O. Box N	OT acceptable)		
	Weston	FL 33331			
	(City, State and Zip			
If the limited liability corconfirmed that after the cand the business office of liability company, it is bethe members of the finite the operating agreement (Signature of a member or althorage) (Signature of a member or althorage) (Printed or typed name of signee I hereby accept the appoarment of the provision and I am familiar with an Chapter 608, F.S. Or, if address, I hereby confirm NBAL Society for	hange of changes the registered ag yeby confirmed the dyliability compa of the limited liab trized representative of a	s are made, the Flori gent will be identica hat the change(s) wa any or as otherwise polity company.	da street address of l. Or, in the case of as/were authorized provided in the artic	The registered office f a Florida limited by an affirmative vote of cles of organization or	
(Signature of Registered Agent)		·			
(AMON ROPHAT	U, ASST. SEC	no =			
Divisio	on of Corporatio	ons, P.O. Box 6327,	Tallahassee, FL	32314	

FILING FEE: \$25.00

INHS18(10/99)