P03000041184

| (Requestor's Name) | | | |
|---|--|--|--|
| (Address) | | | |
| (Address) | | | |
| (City/State/Zip/Phone #) | | | |
| PICK-UP WAIT MAIL | | | |
| (Business Entity Name) | | | |
| (Document Number) | | | |
| Certified Copies Certificates of Status | | | |
| Special Instructions to Filing Officer: | | | |
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TALLAHASSEE, FLORIDA

E S AK O. J.

TRANSMITTAL LETTER

Amendment Section Division of Corporations

TO:

| Dead laccastas anta la a | | | | | |
|---|---|--|--|--|--|
| SUBJECT: Bud Investments, Inc. (Name of corporation) | | | | | |
| DOCUMENT NUMBER: P0300 | • • | | | | |
| The enclosed Statement of Change | of Registered Office/Agent and fee are submitted for filing. | | | | |
| Please return all correspondence co | oncerning this matter to the following: | | | | |
| Mallory Gayle Holm | | | | | |
| (Name of per | rson) | | | | |
| Mallory Gayle Holm, P.A. | | | | | |
| (Name of firm/co | ompany) | | | | |
| 4315 Pablo Oaks Court | | | | | |
| (Address) |) | | | | |
| Jacksonville, Florida 32224 | | | | | |
| (City/state and zi | p code) | | | | |
| For further information concerning | g this matter, please call: | | | | |
| Mallory Gayle Holm | at (904) 710-1358 | | | | |
| (Name of person) | at (904) 710-1358 (Area code & daytime telephone number) | | | | |
| Enclosed is a \$35.00 check made p | payable to the Department of State. | | | | |
| Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 | Street Address: Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399 | | | | |

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

| Pursuant to the | e provisions of sections 607.050 | 2, 617.0502, 607.1508, or 617.1508, Flori | ida Statutes, |
|---|--|---|----------------|
| | of change is submitted for a corpo | oration organized under the laws of the Stat gistered office or registered agent, or both, | e of |
| of Florida. | | | |
| 1. The name of | the corporation: Burl Investments | s, Inc. | |
| 2. The principa | l office address: 4500 Cameron \ | Valley Parkway, Suite 200, Charlotte, NC 282 | 11 |
| 3. The mailing | address (if different): | | NA-3 REEL |
| 4. Date of incom | rporation/qualification: April 11 | Document number: P03000 | 004[184 9 |
| | d street address of the current regartment of State: | gistered agent and registered office on file w | ith the or |
| | Mallory Gayle Holm c/o LeBoeu | f, Lamb, Greene & MacRae, LLP | |
| 50 N. Laura Street, Suite 2800 | | | |
| | Jacksonville, FL 32202 | | |
| 6. The name a changed): | nd street address of the new reg | gistered agent (if changed) and /or register | ed office (if |
| | 4315 Pablo Oaks Court | | |
| | (P.O. Box or person Jacksonville, FL 32224 | nal mailbox NOT acceptable) | |
| The street addragent, as chang | ess of its registered office and the ed will be identical. | e street address of the business office of its | s registered |
| Such change wanthorized by t | as authorized by resolution duly he board, or the corporation has | adopted by its board of directors or by an element of the change. | officer so |
| (Signature of an office | r, chairman or vice chairman of the board) | Burley L. Moss, President (Printed or typed name and title) | <u> </u> |
| I hereby accept I further agree performance of registered ager | t the appointment as registered a to comply with the provisions of fmy duties, and I am familiar wi nt. Or. if this document is being | agent and agree to act in this capacity. If all statutes relative to the proper and come ith and accept the obligation of my position filed merely to reflect a change in the regination that has been notified in writing of this ci | î as stered |
| | | May 22, 2003 | |
| | Signature of Registered Agent) | (Date) | |
| If signing on beha Mallory Gayle H | • | President | |
| | Typed or Printed Name) | (Canaita) | |

* * * FILING FEE: \$35.00 * * *