P03000105452

Florida Department of State
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To:
     Division of Corporations
     Fax Number    : (850)205-0380

From:
     Account Name   : CORPDIRECT AGENTS, INC.
     Account Number : 110450000714
     Phone          : (850)222-1173
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TALLAHASSEE, FLORIDA

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DIVISION OF CORPORATIONS

REGISTERED AGENT CHANGE

6090 TERRY ROAD CORP.

Certificate of Status	0
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STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida *in order to change its registered office or registered agent, or both, in the State of Florida.*

1. The name of the corporation: 6090 TERRY ROAD CORP.
2. The principal office address: C/O SCOTT HERRICK, 2700 SOUTH NELSON STREET ARLINGTON VA 22206
3. The mailing address (if different): c/o LANDMARK ATLANTIC MANAGEMENT 2700 South Nelson St., Arlington, VA 22206
4. Date of incorporation/qualification: 09/25/2003 Document number: P03000105452
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

CORPORATE SERVICE BUREAU INC.
103 N. MERIDIAN STREET
TALLAHASSEE FL 32301

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

CORPORATE SERVICE BUREAU INC.
515 East Park Avenue
(P.O. Box NOT acceptable)
TALLAHASSEE FL 32301

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The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

(Signature of an officer or director) Scott Herrick Managing Partner
(Printed or typed name and title)

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

(Signature of Registered Agent) 8/1/05 (Date)

Scott S. Schuster

If signing on behalf of an entity:

Ed Lary
(Typed or Printed Name)

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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