

Division of Corporations
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To:

Division of Corporations

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r (850)205-0380

From:

Account Name : NATIONAL COR Account Number : I20000000088

: NATIONAL CORPORATE RESEARCH, LTD.

Phone

: (800)221-0102

Fax Number

(212)564-6083

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INISION OF CORPORATION

REGISTERED AGENT CHANGE

PALM BEACH PROPERTIES D.L. INC.

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1/21/2004

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

Pursuant to the	e provisions of sections 607	7.0502, 617.0502,	607.1508, or 617.150	18, Florida	Starutes,	
this statement o	of change is submitted for a	corporation organ	tized under the laws of	the State of	f	
Florida	in order to change i	its registered offic	e or registered agent,	or both, in	the State	
of Florida.	•			•		
1. The name of	the corporation:		,			
	PALM B	EACH PROPERT	IES D.L. INC.	<u>-,</u>		
	l office address: North Meridian St Lower I	_evel	Talishassee	<u></u>	32301	
3. The mailing:	address (if different):		•			
103	North Meridian St.	- Lover Level	Tallahassee	<u>F1</u>	32301	
4. Date of incor	poration/qualification:	1/8/04	Document number:	P04000	807684	
	d street address of the current riment of State:	nt registered agent	and registered office of	n file with	the	
	NATIONAL CORP	ORATE RESE	ARCH, LTD., INC.		. 0	
	1406	5 HAYS ST., ST	E 2		Per S	-17
	TALLAHASSE		L 32301	_	一 安然 美	3
	IMEEMIMOUL		<u> </u>	= -	· 表表。	- 10
6. The name a	nd street address of the nev	w registered agen	t (if changed) and /or	registered	office (if	至。
changed):	National Corp	oorate Resear	ch. Ltd., Inc.		23	THE WALL
:		V. Meridian Str	,		(g/s	
;		personal mailbox NOT a			. O	\$*** *
	Tallahassee	Flor				
The street addre agent, as chang	ess of its registered office a ged will be identical.	nd the street addr	ess of the business off	ice of its re	gistered	
Such change wa	as authorized by resolution he board, or the corporation	duly adopted by i has been notified Domini	ts board of directors o I in writing of the char que Lemaire, Pre:	r by an offi ige. sident	cer so	
			(Printed or typed mane and til		—	
i nereoy accept I further agree performance of registered agen office address.	the appointment as registe to comply with the provision my duties, and I am familit. Or, if this document is but hereby confirm that the co	red agent and agents of all statutes in a coep are with and accepting filed merely opporation has be	ree to act in this capace relative to the proper of the obligation of my to reflect a change in ten notified in writing of	city. Md comple position as the register of this chan	ete ed ge.	
-	lightature of Registered Agent)		(Date)	- :- 		
lf signizg on behal	. <u> </u>		Asst. Secretar	.,		
	Ida Borovoy Typed or Printed Name)	- · · 	Asst. Secretar	У		

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

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