P04000122866

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COVER LETTER

TO: Amendment Section Division of Corporation	ons						
SUBJECT: Daffodil Investments, Inc.							
	Name of Co	rporation					
DOCUMENT NUMBER: P04000122866							
The enclosed Statement of Cha	inge of Registered Office/	Agent and fee are subm	itted for filing.				
Please return all corresponden	-	_	J				
		•					
	Debra Milli	nowisch					
	Name of Contact Person						
	Quarles & B	rady LLP					
	Firm/Con						
	300 N. LaSalle S	t Suite 4000					
	Addre						
	Chicago, IL	60654	•				
	City/State and	Zip Code					
	cpajay@ac	l.com					
E-mail add	iress: (to be used for fut	ure annual report noti	fication)				
		•					
For further information concern	ning this matter, please cal	1:					
			•				
Debra Millir Name of Conta		at (312)	715-5000 ime Telephone Number				
Name of Contac	n Person	Area Code & Dayt	ime Telephone Number				
Enclosed is a \$35.00 check mag	le navable to the Departm	ent of State					
merced is a 455.00 check ma	to payable to the Departin	on or state.					
ng ur.	- 4.3.1	a					
<u>Mailin</u> Amen	g Address: dment Section	Street Address Amendment S	<u>:</u> ection				
	on of Corporations	Division of Co					
	Sox 6327	Clifton Buildi					
	assee FL 32314		2661 Evecutive Center Circle				

Tallahassee, FL 32301

TO:

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

statement of cha	ange is submitted for a co	orporation organized	507.1508, or 617.1508, Flo d under the laws of the Stat d agent, or both, in the State	e of Florida
1. The name of	the corporation: Daffo	dil Investment	s, Inc.	
2. The principal	office address: 9600 V	Vest Sample Ro	ad, Suite 500, Coral S	Springs, FL 33065
3. The mailing a	address (if different):			
4. Date of incorp	poration/qualification:	8/25/2004	Document number:	P04000122866
	d street address of the curriment of State: (If resign		at and registered office on fi	ile with the
	Naples-Lawdock,	nc.		
	1395 Panther Ln.,	# 300		<u> </u>
	Naples, FL 34109			CRETARY PARTIES
6. The name and (if changed):	d street address of the ne	w registered agent (i	f changed) and /or registere	CRETARY OF SYLLAHASSEELFLG
	9600 W. Sample F	Road, Suite 500	centable	PAIC DRIBLE
	Coral Springs, FL			<u> </u>
The street address changed will	ess of its registered office	ce and the street add	dress of the business office	e of its registered agent,
3		ion duly adopted by tion has been notifi	y its board of directors or led in writing of the chang	by an officer so e.
Signatu	Aevi		Jay Serbin, Vic	
I haraby accept	the appointment as rea	istered agent and a isions of all statute d accept the obliga ct a change in the r g of this change.	igree to act in this capacit s relative to the proper an tion of my position as regi egistered office address, I	17
Ju	7 Seri		12/5/1	
Sig	hature of Registered Agent		Date	
	ehalf of an entity:	,	·	
JAFFOD:	VESTMENTS, /No	. / JAY SER	312	

Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

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