

PO4000139417

(Requestor's Name)

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(City/State/Zip/Phone #)

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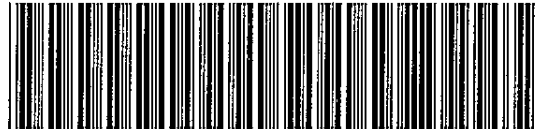
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November 7, 2005

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Re: LL FL, Inc. / 104A00058367 and LL FL West, Inc. / 104A00059602

Dear Sir or Madam:

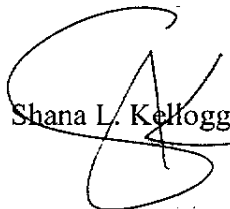
Enclosed for filing are one (1) original and one (1) copy of the following:

1. Statement of Change of Registered Office or Registered Agent or Both for Corporations for LL FL, Inc., along with Kotz, Sangster, Wysocki, and Berg, P.C. check number 45182 in the amount of \$35.00 for the filing fee; and
2. Statement of Change of Registered Office or Registered Agent or Both for Corporations for LL FL West, Inc., along with Kotz, Sangster, Wysocki, and Berg, P.C. check number 45181 in the amount of \$35.00 for the filing fee.

Please return proof of filing in the enclosed self-addressed envelope. If you have any questions and/or comments, please do not hesitate to contact the undersigned.

Sincerely,

Kotz, Sangster, Wysocki and Berg, P.C.


Shana L. Kellogg

SLK/nmq
Enclosures

VIA FIRST CLASS MAIL

S:\Scientific Image Center Management, Inc-84116\LL FL, Inc Correspondence\FL Dept of State Ltr 11-07-05.doc

**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: LL FL, Inc.
2. The principal office address: Cypress Center, 666 North Andrews Ave., Ste 555
Ft. Lauderdale, Florida 33309
3. The mailing address (if different): _____

4. Date of incorporation/qualification: 10/7/04 Document number: P04000139417

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

CT Corporation System
1200 South Pine Island Rd.
Plantation, Florida 33324

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

Kenneth Zorn
1715 N. West Shore Blvd., Ste. 190
(P.O. Box NOT acceptable)
Tampa, Florida 33607-3911

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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]
(Signature of an officer or director)

DAVID M. KENT, PRESIDENT
(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.

KMZ
(Signature of Registered Agent)

11-4-05
(Date)

If signing on behalf of an entity:

(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
CR2E045 (8/05)