

705000159281

Florida Department of State
Division of Corporations
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REGISTERED AGENT CHANGE

SKYLER MAITLAND, INC.

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: Skyter Maitland, Inc.
2. The principal office address: 4445 Willard Avenue, 12th Floor, Chevy Chase, MD 20815
3. The mailing address (if different): _____
4. Date of incorporation/qualification: December 6, 2005 Document number: P05000159281
5. The name and street address of the current registered agent and registered office on file with the
Florida Department of State:

Kimberly Seith
2 North Palofox Street
Pensacola, FL 32502

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

C T Corporation System
1200 South Pine Island Road
(P.O. Box NOT acceptable)
Plantation, FL 33324

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 registered agent or officer)

Carolyn Silva-Quagliato, Asst. Secretary
(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)

3/14/07
(Date)

If signing on behalf of an entity: Judith B. Argao
Asst. Secretary & V. President
(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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