Division of Corporations

Ø 001 1/235-Florida Department of State

Division of Corporations Public Access System Katherine Harris, Secretary of State

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(((H99000015662 2)))

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To:

Division of Corporations

1 (850) 922-4000 Fax Number

From:

: RUDNICK & WOLFE Account Name Account Number: 076424002364 : (813)229-2111

: (813)229-1447 Fax Number

26360.69

REGISTERED AGENT CHANGE

GLENWOOD HOLDINGS, INC.

| Certificate of Status | 0 |
|-----------------------|---------|
| Certified Copy | 0 |
| Page Count | 01 |
| Estimated Charge | \$35.00 |

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

R99000015662

Pursuant to the provisions of Sections 607.0502, 617.0502, 607.1508 or 617.1508, Florida Statutes, the undersigned corporation incorporated under the laws of the State of Florida, submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

| <i>/1 (4</i> -21 | 10 0.10.0 | | | | |
|------------------|---|--|------------------------|---|--|
| 1. | The name | of the corporation is: GLENWO | OD HOLDINGS, INC | | |
| 2. | The mailing address of the corporation is: 1745 W. Fletcher Avenue, Tampa, Fl 33612 | | | | |
| 3. | | ncorporation/qualification: _10/11 | | ment number <u>P93000072355</u> | |
| J. 4. | The name | e and address of the current regist | ered agent and office: | | |
| 5. | The nam The nam Street addressed will be | Nark O. Hackner 745 W. Fletcher Avenue Campa, Florida 33612 The and address of the new registere Michael P. Rice Tampa, Florida 33612 | d agent and office: | SECRETARY OF STATES agent, As y adopted by its board of directors or by | |
| - | | of an officer, chairman or vice chairman a | (the board) | 6-23-99 (Date) | |
| Hav acc | ving been no | ce, Vice President (Printed or Typed Name and Title) amed as registered agent and to ac ointment as registered agent and o ll statutes relative to the proper an gation of my position as registere (Signature of Registered Agent) | d complete performanc | for the above stated corporation, I hereby acity. I further agree to comply with the e of my duties, and I am familiar with and lo - 23-99 (Date) | |
| Ifs | igning on b | ehalf of an entity: | | | |
| | | (Typed or Printed Name) | | (Capacity) | |
| | | | ING FEE: \$35.00 * | * * | |
| CR | 2E045(7/97) | DIVISION OF CORPORATION | P.O. BOX 6327 | TALLAHASSEE, FL 32314 | |
| Pro Flo | epared by: Jo orida Bar No. | hn T. Diamandis 0797677 | | | |

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Rudnick & Wolfe 101 E. Kennedy Blvd.

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