

ACCOUNT NO. : 07210000032

REFERENCE

AUTHORIZATION

COST LIMIT : \$ 35.00

ORDER DATE: April 8, 1998

ORDER TIME : 9:34 AM

ORDER NO. : 773972

500002572225--2

CUSTOMER NO: 5041389

CUSTOMER: Ms. Betty Kenyon

Lowe Enterprises, Inc. 11777 San Vicente Blvd.

Suite 900

Los Angeles, CA 90049

CHANGE OF AGENT

NAME: LOWE/PALM COAST, INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY PLAIN STAMPED COPY

CONTACT PERSON: Cassandra Bryant

Florida Department of State, Sandra B. Mortham, Secretary of State

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

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

Pursuant to the	provisions of sections 607.0502, 617.0502, 607.15	508, or 617.1508, F	lorida Statutes, the
undersigned corporation organized under the laws of the State of			ida
submits the follo	wing statement in order to change its registered of	fice or registered ag	gent, or both, in the
State of Florida.			
1. The name of	the corporation is: Lowe/Palm Coast, Inc.		÷
2. The mailing a	ddress of the corporation is: 11777 San Vicente	Blvd, #900	
Los Angel	es, CA 90049		
3. Date of incom	poration/qualification: August 28, 1995 Do	cument number:	95000066282
4. The name and	address of the current registered agent and office:		
	B&C Corporate Services of Cent		TALL SEC 80
<u>.</u>	390 N. Orange Ave, #1100		JUN 2 RETANANAHASI
<u>,</u>	Orlando, FL 32301		SEX 2
5. The name and	address of the new registered agent and office: (P.	O. Box Not Accepta	able) 🤗 😤 🚺
(Corporation Service Company		
<u>:</u>	1201 Hays Street		Sm o
-	Tallahassee, FL 32301		
	ess of its registered office and the street address of ed, will be identical.		
Such change wa	as authorized by resolution duly adopted by its bone board.	oard of directors or	by an officer so
ZeHi	of Klum	51	29 191
(Signature)	of an officer, chairman or vice chairman of the board)		te)
_		6/20	71 98
· Cetty.	T. Kenyn, Secretary (Printed of typed name and title)		Oate)
Having heen no	med as registered agent and to accept service of the appointment as registered agent to comply with the provisions of all statutes relating the my duties, and I am familiar with and accept the	process for the abo	ove stated
performance of registered agen	my duties, and I am familiar with and accept the	obligation of my p	osition as
	prvice Company	. 6/26	498
(\$	Ignature of Registered Agent)	(Date)	
If signing on behal	f of an entity:		
Lori Castan	·	Assistant Vice Pr	resident
(Typed or Printed Name)	(Capacity)	

CR2E045(3/96)