

P99000103486

Florida Department of State  
Division of Corporations  
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Fax Number : (850) 617-6380

From: Account Name : SHUTTS & BOWEN, LLP  
Account Number : 076447000313  
Phone : (305) 358 6300  
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REGISTERED AGENT CHANGE  
DEI HOLDINGS, INC.

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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: DEI HOLDINGS, INC.
- 2. The principal office address: 1 VIPER WAY  
VISTA, CALIFORNIA 92081
- 3. The mailing address (if different): C/O MICHAEL S. SIMMONS, 1 VIPER WAY  
VISTA, CALIFORNIA 92081
- 4. Date of incorporation/qualification: 11/29/1999 Document number: P99000103486
- 5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FLORIDA 32301-2525

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- 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
- CORPORATION COMPANY OF MIAMI  
201 SOUTH BISCAYNE BOULEVARD, SUITE 1500 (AGS)  
P.O. Box NOT acceptable  
MIAMI, FLORIDA 33131

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

Michael Simmons, EVP  
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.*

By: [Signature]  
Signature of Registered Agent  
 Cavell J. Anderson, Asst. Secretary  
 If signing on behalf of an entity:

09/19/2011  
Date

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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