07/13/2005

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Account Name : C T CORPORATION SYSTEM

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REGISTERED AGENT CHANGE

LODESTAR TOWER CHARLOTTE, INC.

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CT CORPORATION

4048886498 P.02/02

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

this statement of	f change is submitted for a corpora	617,0502, 607.1508, or 617.1508, Flari ation organized under the laws of the Stat stered office or registered agent, or both,	e of
of Florida			
	the corporation: Lodestar Tower Cha	arlotte, Inc.	
• -			2° 3
400 Regency	Forest Drive, Cary, NC - 27511		
3. The mailing:	address (if different):		AH.
V, 1110 23323-1-8			လွှံ့
4. Date of incor	poration/qualification: 08/07/1992	Document number: V55949	E S
5. The name an Florida Depa	d street address of the current regis	tered agent and registered office on file w	th the A
		rate Research, Ltd.	
	103 N. M	eridian Street	
1	Tallabass	cc, FL 32301	
6. The name an changed):	_	tered agent (if changed) and for registere	ed office (if
•	alo C T Com	a metion Charten	
	C/O C T Corporation System (P.O. Box or personal methox NOT acceptable)		
	1200 South Pine Island Ro	ad, Plantation, Florida 33324	
The street addresses, as change	ess of its registered office and the sed will be identical.	street address of the business office of its	registered
Such change was authorized by the	is authorized by resolution duly ad the board, or the corporation has be	lopted by its board of directors or by an o en notified in writing of the change.	ifficer so
XW	dhantinan or vice chartinan of the board)	James S Ecliman Assistant Tressurer (Fished or typed same and nite)	
I hereby accept I further agree to performance of registered agen office address.	the appointment as registered age to comply with the provisions of al my dulies, and I am familiar with I. Or, if this document is being file hereby confirm that the corporati	int and agree to act in this capacity. If statutes relative to the proper and comi and accept the obligation of my position and merely to reflect a change in the regis ton has been notified in writing of this ch	
By: CT	Corporation System	7/13/05	
(\$	Shoture of Registered Agent)	(Date)	
If signing on behal	g on behalf of an entity: JOAN BOLDEN		
	ASSISTANT SECRETARY		
f a	yped or Printed Name)	(Capacity)	

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

MARE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE AND MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TAILAMASPER, FL 32314