103000019712

(Populastor's Name)
ParkTek, LLC
Ms. Sheryl Cropesa 9650 9th Ave N St Petersburg, FL 33710-6102
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
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W3-19712

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida. Parktek LLC 1. The name of the limited liability company is: 2. The mailing address of the limited liability company is : 6650 9th Avenue North St. Petersburg, FL 33710 L03000019712 06/02/2003 3. Date of filing/registration in Florida 4. Document number 5. The name of the registered agent and the registered office address as shown on the records of the

Florida Department of State:

Philip L. Oropesa Name 6650 9th Avenue North Address St. Petersburg, FL 33710 City, State and Zip

6. The name and address of the new registered agent and/or office:

Shervi B. Oropesa Name 6650 9th Avenue North Florida street address (P.O. Box NOT acceptable) St. Petersburg FI 33710 City, State and Zip

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

(Signature of a member of authorized representative of a member) ropesa Sheryl

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 obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

(Signature of Registered Agent)

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

FILING FEE: \$25.00

(Printed of typed name of signee)