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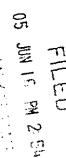
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COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: BLUE COMPONENTS CORP (Name of corporation)
DOCUMENT NUMBER: <u>PO3000121322</u>
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
LUCIANO BATISTA (Name of contact person)
Blue Components GRA (Firm/Company)
1824 BANYAN CREEK Circle North
Boyton Beach, FL 33436 (City/state and zip code)
For further information concerning this matter, please call:
LUCIANO BA +15+A at (561) 737 - 4836 (Area code & daytime telephone number)
(Area code & daytime telephone number)

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address: Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399

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

in order to change its registered office or registered agent, or both, in the State of Florida. The name of the corporation: BLUC COM POWENTS CORP. The principal office address: 17/1 NW 49th State t. POW AND BEACH FL 33064 The mailing address (if different): SAMC AS Above Date of incorporation/qualification: 10/29/2003 Document number: 203 000/21/322 The name and street address of the current registered agent and registered office on file with the Florida Department of State: 12/1 NW 49th State The State	Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this
The name of the corporation: BLUC COM PONCNTS CORP. The principal office address: // NW 49th Staget. POM AND BEACH FL 33064 The mailing address (if different): SAMC AS About. Date of incorporation/qualification: 0/29/2003 Document number: PO3 000121322 The name and street address of the current registered agent and registered office on file with the Florida Department of State: PEARO CISNEIROS 17/ NW 49th Staget Stag	statement of change is submitted for a corporation organized under the laws of the State of <u>The id</u>
The principal office address: \(\frac{17}{NN \ \frac{19}{15} \) \(\frac{1}{15} \) \(\f	in order to change its registered office or registered agent, or both, in the State of Florida.
Date of incorporation/qualification: \(\langle \langle 2 \) \(\langle 2 \) \	1. The name of the corporation: BLUC COMPONENTS CORP. 2. The principal office address: 1/7/ NW 49+h Stace+.
Date of incorporation/qualification: \(\langle \langle 2 \) \(\langle 2 \) \	rompano Beach of FL 33064
Date of incorporation/qualification: \(\langle \langle 2 \) \(\langle 2 \) \	The mailing address (if different): \(\lambda \) \(\lambda \)
The name and street address of the current registered agent and registered office on file with the Florida Department of State: **PEGRO CISNE/ROS** 17	5. The maining address (if different).
Florida Department of State: Pedro Cisne/Ros //7/ Alw 49th State Pomphy Brack The name and street address of the new registered agent (if changed) and /or registered office (if changed): Luciano Batista (P.O. Box NOT acceptable) Bayton Beach FL 33436 The street address of its registered office and the street address of the business office of its registered agent, schanged will be identical. uch change was authorized by resolution duly adopted by its board of directors or by an officer so uthorized by the board, or the corporation has been notified in writing of the change. Pedro Cisne/Ros - Freesident Pedro Cisne/Ros - Freesident Interests accept the appointment as registered agent and agree to act in this capacity, further agree to comply with the provisions of all statutes relative to the proper and complete performance for my dutties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this occument is being filled merely to reflect a change in the registered office address. Thereby confirm that the	4. Date of incorporation/qualification: 10/29/2003 Document number: PO3 000/2/32
The name and street address of the new registered agent (if changed) and /or registered office (if changed): Lociano Batista Lociano	5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
The name and street address of the new registered agent (if changed) and /or registered office (if changed): Lociano Batista Lociano	Pedro Cisneiros
(if changed): Lociano Batista. Lociano Batista Lociano Bati	117/NW 49th Street 32 = 1
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Asignature of Registered Agent) A 6/12/05 (Date)	(Date)
signing on behalf of an entity:	f signing on behalf of an entity:

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