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Florida Department of State
Division of Corporations
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To:
Division of Corporations
Fax Number : (850) 205-0380

From:
Account Name : CORPORATION SERVICE COMPANY
Account Number : I200000000195
Phone : (850) 521-1000
Fax Number : (850) 558-1575

REGISTERED AGENT CHANGE

BUCCANEER EXPLORATION INC.

Certificate of Status	0
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Estimated Charge	\$35.00

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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: BUCCANER EXPLORATION INC.
2. The principal office address: 6 Kersdale Avenue
Toronto, Ontario - M6M 1C4 - Canada
3. The mailing address (if different): _____

4. Date of incorporation/qualification: May 3, 2006 Document number: H06000062787

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

STEVE SANDERS

7865 Amethyst Lake Point

Lake Worth FL 33467

6. The name and street address of the new registered agent (if changed) and for registered office (if changed):

CORPORATION SERVICE COMPANY

1201 Hays Street

(If C. Box, NOT acceptable)

Tallahassee, FL 32301

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.

Kioni Muri
(Signature of an officer or director)

Kioni Muri - Secretary and Treasurer and Director
(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: Sarah K. Drake
(Signature of Registered Agent)

August 11, 2006

(Date)

If signing on behalf of an entity:

Sarah K. Drake
(Typed or Printed Name)
as its agent

*** 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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