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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: McNatt Family Enterprises, Ltd.

Name of Limited Partnership or Limited Liability Limited Partnership

DOCUMENT NUMBER: A93000000115

The enclosed Statement of Change of Registered Office and/or Registered Agent and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

Christopher R. Dingman, Esquire

Contact Person

Johnson Pope Bokor Ruppel & Burns, LLP

Firm/Company

401 E. Jackson Street, Suite 1100

Address

Tampa, Florida 33602

City, State and Zip Code

hmcnatt.j@mcnattcleaners.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Christopher R. Dingman, Esquire

at (813) 225-2500

Name of Contact Person

Area Code and Daytime Telephone Number

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

Mailing Address:

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

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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**LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP
STATEMENT OF CHANGE OF REGISTERED OFFICE OR
REGISTERED AGENT, OR BOTH**

Persuant to the provisions of section 620.1115, Florida Statutes, the undersigned limited partnership or limited liability limited partnership submits the following statement in order to change its registered office or registered agent, or both, in the state of Florida.

1. McNatt Family Enterprises, Ltd.

Name of Limited Partnership or Limited Liability Limited Partnership

2. 02/02/1993

Date of filing/registration in Florida

3. A93000000115

Florida document number

4. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

C T Corporation System

Name

1200 South Pine Island Road

Address

Plantation, Florida 33324

City, State and Zip

5. The name and Florida street address of the new registered agent and or officer:

Chestnut Business Services, LLC

Name

911 Chestnut Street

Florida street address (P.O. Box not acceptable)

Clearwater

FL 33756

City, State and Zip

6. Such change(s) is/are effective when filed by the Florida Department of State.

[Signature]
Signature of General Partner

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.

[Signature]
Signature of Registered Agent

Filing Fee: \$35.00

Certified Copy (optional): \$52.50

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