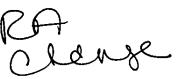
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(Reque	estor's Name)	
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PICK-UP	WAIT	MAIL
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Certified Copies	Certificates	s of Status
Special Instructions to Fili	na Officer:	

Office Use Only



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MOR.



ACCOUNT NO. : 07210000032		
REFERENCE : 321056 7394358		
AUTHORIZATION : Levels & Company		
COST LIMIT : \$35.00		
ORDER DATE: November 15, 2007		
ORDER TIME: 10:13 AM		
ORDER NO. : 321056-290		
CUSTOMER NO: 7394358		
CHANGE OF AGENT		
NAME: KENDALE LAKES LODGE #2086 LOYAL ORDER OF MOOSE, INC.		
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:		
CERTIFIED COPY		
XX PLAIN STAMPED COPY		
CONTACT PERSON: Debbie Skipper EXT# 2948		
EXAMINER:		
DAMITINEX.		

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

statement of cha	orovisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this nge is submitted for a corporation organized under the laws of the State of Florida to change its registered office or registered agent, or both, in the State of Florida.
1. The name of t	he corporation: KENDALE LAKES LODGE #2086 LOYAL ORDER OF MOOSE, INC.
2. The principal	office address: Kendale Lakes Mooselodge 2086, 12254 SW 128 Street, Miami, FL 33186
3. The mailing a	ddress (if different):
4. Date of incorp	poration/qualification: 03/26/1979 Document number: 746480
	street address of the current registered agent and registered office on file with the tment of State:
	Richard Farrell
	12254 SW 128th Street
	Miami, FL 33186
6. The name and (if changed):	Miami, FL 33186 Street address of the new registered agent (if changed) and /or registered office SRY
	Corporation Service Company 1201 Have Street
	1201 Hays Stieet
	(P.O. Box NOT acceptable)
	Tallahassee, FL 32301
The street addre as changed will	ss of its registered office and the street address of the business office of its registered agent, be identical.
Such change wa authorized by th	s authorized by resolution duly adopted by its board of directors or by an officer so e board, or the corporation has been notified in writing of the change.
Mouras (Signatu	Maureen Cullen, Attorney In Fact (Printed or typed name and title)
I further agree t of my duties, an document is beil corporation has	the appointment as registered agent and agree to act in this capacity. o comply with the provisions of all statutes relative to the proper and complete performance d I am familiar with and accept the obligation of my position as registered agent. Or, if this ng filed merely to reflect a change in the registered office address, I hereby confirm that the been notified in writing of this change.
By: Mc	Service Company Nature of Registered Agent) (Date)
If signing on bel	half of an entity:
Michelle R. Vant	noy, Assistant Vice President
(T	yped or Printed Name)

Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

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