

FROM : WRIGHT & SMITH, P.A.  
Division of Corporations

FAX NO. : 239-542-9987

NOV 17 2004 04:40PM P1  
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**A99000001952**

Florida Department of State  
Division of Corporations  
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From: Account Name : CHRISTINE F. WRIGHT, P.A.  
Account Number : T20020000105  
Phone : (239)542-9955  
Fax Number : (239)542-9987

**A99-1952**

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**REGISTERED AGENT CHANGE**

**HELMAG INVESTMENT, LTD.**

|                       |         |
|-----------------------|---------|
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FROM : WRIGHT &amp; SHAW, P.A.

FAX NO. : 2395429987

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Sent By: Hansen Luke;

239-390-0971;

Nov-17-04 17:45;

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FROM : WRIGHT &amp; SHAW, P.A.

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

Pursuant to the provisions of sections 620.104 and (21).1051, Florida Statutes, the undersigned limited partnership submits the following statement in order to change its registered office or registered agent, or both, in the state of Florida.

- Helmag Investment, Ltd  
Name of the limited partnership
- 11/23/1999  
Date of filing registration in Florida
- A99000001952  
Document number assigned
- The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:  
US Investor Services Inc  
Name  
4501 Tamiami Trl, N  
Address  
Naples, FL 34103  
City, State and Zip
- The name and address of the new registered agent and/or office:  
Christine F. Wright  
Name  
4427 SE 11th Place #2  
Florida street address (P.O. Box not acceptable)  
Cape Coral, FL 33904  
City, State and Zip
- Such change(s) was/were authorized by the general partner(s).

Thomas J. Luke  
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. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the limited partnership has been notified in writing of this change.

Christine F. Wright  
Signature of Registered Agent

Make checks payable to Florida Department of State and mail to:  
Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314  
Filing Fee: \$35.00

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