F01000001382

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COVER LETTER

TO:	Amendment Section Division of Corporations	3					
SUBJ	ECT:	Scropino Name of C		·			
DOC	JMENT NUMBER:	F01	000001382				
The er	nclosed Statement of Chan	ge of Registered Offic	e/Agent and fee are s	ubmitted for filing.			
Please	return all correspondence	concerning this matter	to the following:				
		Michael	Reardon	···			
		Name of Co	ntact Person				
	Hill Robinson International Inc.						
	Firm/Company						
	1845 Cordova Road, Suite 211						
	Address						
	Fort Lauderdale, FL 33316 City/State and Zip Code						
	michael@hillrobinson.com						
	E-mail address: (to be used for future annual report notification)						
For fu	rther information concerni	ng this matter, please o	call:				
	Barrett Wr		_at(_954)_	792-6112 Daytime Telephone Number			
	Name of Contact	Person	Area Code & 1	Daytime Telephone Number			
Enclos	sed is a \$35.00 check made	payable to the Depart	ment of State.				
	Amend Divisio P.O. Bo	Address: ment Section n of Corporations ox 6327 ssee, FL 32314	Division of Clifton By 2661 Execution	ent Section of Corporations uilding cutive Center Circle			
			Tallahassa	e FI 32301			

CR2E045 (8/05)

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

Pursuant to the statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Stange is submitted for a corporation organized under the laws of the State of $\underline{ extbf{C}}$	atutes, this ayman Isl	ands	
	er to change its registered office or registered agent, or both, in the State of \overline{Flc}			
1. The name of	the corporation: Scropino Ltd. Corporation			
2. The principal	office address: Cayman Business Park, Suite A7	a		
	wn, Grand Cayman			
3. The mailing a	address (if different): 1845 Cordova Road, Suite 211			
Fort Lau	iderdale, FL 33316			
4. Date of incorporation/qualification: 03/21/2001 Document number: F0100			382	
	d street address of the current registered agent and registered office on file with rtment of State: (If resigned, enter resigned)	the		
	Clive McCartney			
	1800 S.E. 10th Avenue, Suite 400			
	Fort Lauderdale, FL 33316			
		e ITA	- 101 - 101	
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):				
	Michael Reardon	-		
	1845 Cordova Road, Suite 211			
	P.O. Box NOT acceptable		ယ္ ႏ္	
	Fort Lauderdale, FL 33316			
	ess of its registered office and the street address of the business office of its lbe identical.		igent,	
Such change w authorized by t	as authorized by resolution duly adopted by its board of directors or by an of the board, or the corporation has been notified in writing of the change.	officer so		
Signati	Joseph S. Steinberger or director Printed or typed name and talk	erg		
I hereby accept I further agree of my duties, ar document is be corporation ha	t the appointment as registered agent and agree to act in this capacity. to comply with the provisions of all statutes relative to the proper and comp nd I am familiar with and accept the obligation of my position as registered ing filed merely to reflect a change in the registered office address, I hereby s begin notified in writing of this change.	plete perform agent. Or, confirm th	mance if this at the	
Sie	Inture of Registered Agent Date			
If signing on be	chalf of an entity:			
Micha	Iyped or Printed Name			

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (8/05)

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