| (Re | equestor's Name) | | | |
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| | | | | |
| (Address) | | | | |
| (Ac | ldress) | | | |
| (Ci | ty/State/Zip/Phon | e #) | | |
| PICK-UP | ☐ WAIT | MAIL | | |
| (Bu | ısiness Entity Nar | me) | | |
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Office Use Only



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COVER LETTER

| TO: | Amendment Section Division of Corporation | ns | | | | | |
|---|---|---|---|------------------|--|--|--|
| SUBJECT: Stanley International, Inc. Name of Corporation | | | | | | | |
| | | Name of Corp | oration | | | | |
| DOC | UMENT NUMBER: | F0100 | 0003295 | | | | |
| The e | The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing. | | | | | | |
| Please | e return all correspondenc | ce concerning this matter to | the following: | | | | |
| | | 3 | J | | | | |
| | | Robert Ha | yden | | | | |
| | | Name of Contact | ct Person | | | | |
| | | | | | | | |
| | | Stanley Interna Firm/Com | | | | | |
| | | r irm/Com | oany | | | | |
| | | | | | | | |
| | | 111 Peach Tr Addres | | <u> </u> | | | |
| | | Addres | • | | | | |
| | | . | | | | | |
| | · | Spring Hill Fl City/State and 2 | _ 34608 Zin Code | | | | |
| | | Oity/State and 2 | Sip Code | | | | |
| | | robertbhayden@ | gaol.com | | | | |
| | E-mail address: (to be used for future annual report notification) | | | | | | |
| | | | | | | | |
| For fi | urther information concer | ning this matter, please call | : | | | | |
| | Robert H | avden | at (925) | 698-5972 | | | |
| | Name of Conta | ct Person | at (925) Area Code & Daytime | Telephone Number | | | |
| Enclo | osed is a \$35.00 check ma | de payable to the Departme | ent of State. | | | | |
| | Amer Divis | ng Address: Idment Section Idmond Corporations Box 6327 | Street Address: Amendment Sect Division of Corp Clifton Building | orations | | | |
| | | nassee, FL 32314 | 2661 Executive | | | | |

Tallahassee, FL 32301

TO:

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

| statement of ch | ne provisions of sections 607.0502, 617.0502, 607.1508, or 617.15 hange is submitted for a corporation organized under the laws of t der to change its registered office or registered agent, or both, in t | the State of Nevada | | | |
|--|--|---|--|--|--|
| 1. The name of | of the corporation: Stanley International, Inc. | | | | |
| 2. The principa | The principal office address: 111 Peach Tree Drive Spring Hill FL 34608 | | | | |
| 3. The mailing | g address (if different): | | | | |
| 4. Date of inco | orporation/qualification: 11/13/2000 Document numb | er: F01000003295 | | | |
| | and street address of the current registered agent and registered officertment of State: (If resigned, enter resigned) | ce on file with the | | | |
| | Stanley Skidmore | | | | |
| | 111 Peach Tree Drive | | | | |
| | Spring Hill FL 34608 | TASE | | | |
| 6. The name ar (if changed) | and street address of the new registered agent (if changed) and /or r | アノ アア | | | |
| | Robert Hayden | P FF | | | |
| | 111 Peach Tree Drive | SSEE, FLOW | | | |
| | P.O. Box NOT acceptable Spring Hill FL 34608 | <u></u> | | | |
| The street add as changed wi | dress of its registered office and the street address of the busines ill be identical. | ss office of its registered agent, | | | |
| Such change vauthorized by | was authorized by resolution duly adopted by its board of direct the board, or the corporation has been notified in writing of the | tors or by an officer so e change. | | | |
| | | Hayden President yped name and title | | | |
| I furthér agré of my duties, d document is b | pt the appointment as registered agent and agree to act in this ce to comply with the provisions of all statutes relative to the province and I am familiar with and accept the obligation of my position being filed merely to reflect a change in the registered office address been notified in writing of this change. | capacity oper and complete performance as registered agent. Or, if this dress, I hereby confirm that the | | | |
| m | mblur o | 5/10/2010 | | | |
| If signing on | behalf of an entity: | Date | | | |
| | Robert Hayden Typed or Printed Name | | | | |

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