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IV	FILING Amondment
	CORPORATE NAME AND DOCUMENT ID
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	J.INSTRUCTIONS:

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this		
statement of change is submitted for a corporation organized under the laws of the State of		
1. The name of the corporation: PACIFICONE, INC	_	
2. The principal office address: 250 N. HARBOR DR #315		
REDONDO BEACH CA 90277		
3. The mailing address (if different):		
4. Date of incorporation/qualification: 3/19/2005 Document number: F02000001344		
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:		
PETERS, JOE		
2115 ALMIRA ST		
JACKSONVILLE, FL 32211		
6. The name and street address of the new registered agent (if changed) and /or registered officers (if changed):		
PARACORP INCORPORATED		
236 EAST 6TH AVE		
(F.O. Box NOT acceptable)		
TALLAHASSEE, FL 32303		
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.		
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.		
(Signature of an officer or prector) William P. Olsovsky, President (Printed or typed name and title)		
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 obligation 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 corporation has been notified in writing of this change.		
MAY 23, 2006 (Signature of Registered Agent). MAY 23, 2006 (Date)		
If signing on behalf of an entity:		
Denise Zollner Assistant Secretary (Typed or Printed Name)		

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