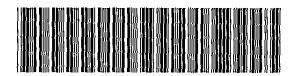
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## **COVER LETTER**

TO: Amendment Section Division of Corporations
SUBJECT: Mirabilis Ventures, Inc. (Name of corporation)
DOCUMENT NUMBER: F05000004040
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Philip Kaprow (Name of contact person)
(Name of contact person)
Mirabilis Ventures, Inc.
(Firm/Company)
20 N. Orange Avenue, Suite 1400 (Address)
(Madioss)
Orlando, Florida 32801
(City/state and zip code)
For further information concerning this matter, please call:
Philip Kaprow  at (407 ) 318-8000  (Name of contact person) (Area code & daytime telephone number)
(Name of contact person) (Area code & daytime telephone number)
Enclosed is a \$35.00 check made payable to the Department of State.
Mailing Address:  Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314  Street Address: Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this ange is submitted for a corporation organized under the laws of the State of Nevada are to change its registered office or registered agent, or both, in the State of Florida.
1. The name of 2. The principal	the corporation: Mirabilis Ventures, Inc.  office address: 3838 Raymert Drive, Suite 3 Las Vegas, NV 89121
	address (if different): 20 N. Orange Avenue, Suite 1400
4. Date of incor	poration/qualification: 7-14-2005 Document number: F05000004040
5. The name and	d street address of the current registered agent and registered office on file with the rtment of State:
	Scott M. Goldberg
	20 N. Orange Avenue, Suite 1400
	Orlando, Florida 32801
6. The name and (if changed):	Orlando, Florida 32801  I street address of the new registered agent (if changed) and /or registered office
	Philip Kaprow
	20 N. Orange Avenue, Suite 1400
	(P.O. Box NOT acceptable)  Orlando, Florida 32801
-	ess of its registered office and the street address of the business office of its registered agent, be identical.
	as authorized by resolution duly adopted by its board of directors or by an officer so the board, or the corporation has been notified in writing of the change.  Robert Pollack  (Printed or typed name and title)
<i>U</i>	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 complete performance and I am familiar with and accept the obligation of my position as registered agent. Or, if this ing filed merely to reflect a change in the registered office address, I hereby confirm that the seen notified in writing of this change.
July V	Phature of Registered Agent) (Date)
If signing on be	chalf of an entity:
	Typed or Printed Name)

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