F05000004278

(Requestor's Name) 515 East Parkage (Address) (Address) (City/State/Zip/Phone #) (PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:	URAU SIKS MO							
(Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status	(Requestor's Name) 515 East Parkage							
(City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status	(Address)							
PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status	(Address)							
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(Document Number) . Certified Copies Certificates of Status	PICK-UP WAIT MAIL							
Certified Copies Certificates of Status	(Business Entity Name)							
	(Document Number)							
Special Instructions to Filing Officer:	Certified Copies Certificates of Status							
	Special Instructions to Filing Officer:							

Office Use Only



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11 MAY 10 PH 1: 02

SECRETARY OF STAIL DIVISION OF CORPORATIONS

RAROCHS 10 5/17/11

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

statement of cha	inge is submitted for a co	orporation organize	507.1508, or 617.1508, Flo d under the laws of the Stat l agent, or both, in the Stat	te of California	
	the corporation: Gatlir office address: 101 S.				
3. The mailing a	address (if different):				
4. Date of incor	poration/qualification:	07/26/2005	Document number:	F050000042	278
	d street address of the cur runent of State; (If resign		t and registered office on f	ile with the	
	UCC Filing & Sear	ch Services, Inc	·		
	1574 Village Squa	re Blvd., Suite 1	00		
	Tallahassee, FL 3	2309			. 9
6. The name and (if changed):	d street address of the ne	w registered agent (i	f changed) and /or registen	ed office	11 MAY 10 PH 1: 02
	NRAI Services, I	nc.			10
	515 East Park Av	enue			PH I
	Tallahassee, FL 3	P.O. Box NOT so	eptable		1: 02
The street address changed will	ess of its registered office be identical.	e and the street add	lress of the business office	e of its registered a	igent,
-		ion ruly adopted by	vits board of directors or led in writing of the chang	by an officer so e.	
Olen	re of an officer or director	1000	Loren K. Van Der	Slik, President	
I hereby accept I further agree of my duttes, an document is bet corporation has NRAI Service	to comply with the provi ad I am familiar with an ing filed merely to reflec a been nafffied in writin	istered agent and a isions of all statutes d accept the obliga- et a change in the ri g of this change.	gree to act in this capacit relative to the proper un tion of my position as reg egistered office address, T	h,	nance if this at the
•	mature of Registered Agent	-	Date		
If signing on be	chalf of an entity:				
	nerick, Assistant Se ypod or Printed Name	cretary			

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

CR2E045 (8/05)

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