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SECRETARY OF STATE FALLAHASSEE, FLORIDA

FILED

COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: CASTLEBERRIE INC. (Nam	ne of Corporation)
DOCUMENT NUMBER: F06000004535	
The enclosed Statement of Change of Registered	d Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this	matter to the following:
Annette Finch	
(Name	e of Contact Person)
Corporate Direct, Inc.	Firm/Company)
2248 Meridian Blvd. S	te H (Address)
Minden Nevada 89423 (City/S	State and Zip Code)
For further information concerning this matter, p	please call:
Annette Finch (Name of Contact Person)	at (775) 782-1302 (Area Code & Daytime Telephone Number)
Enclosed is a \$35.00 check made payable to the	Department of State.
Mailing Address: Amendment Section Division of Corporation P.O. Box 6327 Tallahassee, FL 32314	Clifton Building

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 Statement of change is submitted for a corporation organized under the laws of the State of NE in order to change its registered office or registered agent, or both, in the State of Florida Statement of the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statement of change its registered office or registered agent, or both, in the State of Florida Statement of change its registered office or registered agent, or both, in the State of Florida Statement of change its registered office or registered agent, or both, in the State of Florida Statement of change its registered office or registered agent, or both, in the State of Florida Statement of change its registered office or registered agent, or both, in the State of Florida Statement of change its registered office or registered agent, or both, in the State of Florida Statement of change its registered office or registered agent, or both, in the State of Florida Statement of Change its registered office or registered agent, or both, in the State of Florida Statement of Change its registered office or registered agent, or both, in the State of Florida Statement of Change its registered of of Cha	EVADA
1. The name of the corporation: CASTLEBERRIE INC.	
2. The principal office address: 2248 MERIDIAN BLVD. STE H MINDEN NV 89423	
3. The mailing address (if different):	
4. Date of incorporation/qualification: 07/05/2006 Document number: F0600000)4535
5. The name and street address of the current registered agent and registered office on file with t Florida Department of State:	he
TENBRINK, DEBRA A.	
1238 VILLAGE LAKES BLVD UNIT 3-10	7A.S
LEHIGH ACRES FL 33936	7 K
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):	FILED. 07 MAY 21 AM 10: 5 SECRETARY OF STATE O
GERRI DETWEILER	FLOOF STA
1037 GREYSTONE LANE	RIDA RIDA
(P.O. Box NOT acceptable) SARASOTA, FL 34232	
The street address of its registered office and the street address of the business office of its ras changed will be identical.	egistered agent,
Such change was authorized by resolution duly adopted by its board of directors or by an of authorized by the board, or the corporation has been notified in writing of the change.	
R. Steenst Richard Richard Report Here)
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 compl of my duties, and I am familiar with and accept the obligation of my position as registered adocument is being filed merely to reflect a change in the registered office address, I hereby corporation has been notified in writing of this change.	ete performance gent. Or, if this confirm that the
Sterie Detwelers May 15, 2007 (Signature of Registered Agent)	
If signing on behalf of an entity:	
Annette Finch, Corporate Direct, Inc. (Typed or Printed Name)	

Make Checks Payable to Florida Department of State
Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

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