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Division of Corporations

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**Florida Department of State  
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To:  
Division of Corporations  
Fax Number : (850) 617-6380

From:  
Account Name : VCORP SERVICES, LLC  
Account Number : 120080000067  
Phone : (845) 425-0077  
Fax Number : (845) 818-3388

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: \_\_\_\_\_

**REGISTERED AGENT CHANGE  
INITIAL OUTFITTERS, INC.**

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$35.00

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**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 in order to change its registered office or registered agent, or both, in the State of Florida.*

1. The name of the corporation: Initial Outfitters, Inc.
2. The principal office address:

209 ALABAMA ST  
AUBURN AL 36832

3. The mailing address (if different):
4. Date of incorporation/qualification: 5/12/2008  
Document number: F08000002143

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

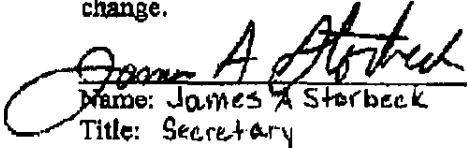
C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION FL 33324 US

6. The name and street address of the new registered agent (if changed) and/or registered office

Vcorp Services, LLC  
7630 Lago Del Mar Drive Suite # 10  
Boca Raton, FL 33433

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.

  
Name: James A Starbeck  
Title: Secretary

*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*

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*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.*

\_\_\_\_\_  
Registered Agent

*Isaac Muller, CEO of: Vcorp Services LLC*  
If signing on behalf of an entity: Vcorp Services, LLC  
(Typed or Printed Name)