| Principal Place of Business     A651 ARNOLD AVENUE     MAPLES, FL 34104 US     MAPLES, FL 34102     MAPLES, FL 34102     MAPLES, FL 34102     MAPLES, FL 34102     MAPLES, FL 34104  | 1. Entity Nan                       |  | <u> </u>                             |  |   | Jan<br>S   | FILE<br>11, 2008<br>ecretary | <b>08:00</b> A   |
|--|-------------------------------------|--|--------------------------------------|--|---|--|------------------------------|--|
| 4651 ARNOLD AVENUE<br>NAPLES, FL 34104       461682008       No Chap-P       CR2E034 (11/05)         4.       FEI Number<br>59-2113982       Insteam       1025 FEI TA AVENUE NORTH<br>NAPLES, FL 34102       Insteam         8.       The above named entity submits bits statement for the purpose of changing its registered agent, or both, in the State of Ploide.       Mark and<br>the obligatories of registered agent.       01 06/08         8.       The above named entity submits bits statement for the purpose of changing its registered office or registered agent, or both, in the State of Ploide.       Non the state of Ploide.       Non the state of Ploide.         8.       The above named entity submits bits statement for the purpose of changing its registered office or registered agent.       01 06/08       01 06/08         8.       The above named entity submits bits statement for the purpose of changing its registered office or registered agent.       01 06/08       01 06/08         8.       The above named entity submits bits statement for the purpose of changing fiberacting       \$5.00 May Bits<br>Astate of Pees State of Ploide.       01 06/08         9.       The above named entity submits bits statement for the  | D.J. EAC                            | AVATING ENTERPRISES, IN  | С.                                   |  |   |  | v                            |  |
| DO NOT WRITE IN THIS SPACE         0.0662008       No.ChgP       CR26034 (11/05)         Certificate of Status Dasired         Status Dasired         DO NOT WRITE IN THIS SPACE         BAVIELLO, MICHAEL J AR<br>10225 FIFT HAVENUE NORTH         NALES, FL 34102         IN THIS SPACE         STATUTE         SPACE         SIGNATURE         SUBAL TURE to status of entry status of the purpose of changing its registered office or registered agent, or both, in the Status of Flocia. Len families with, and its addition for registered agent.         SIGNATURE         SUBAL TURE to status of entry status addition for registered agent.         SUBAL TURE to status of entry status addition for registered agent.         SUBAL TURE to status of entry status addition for registered agent.         SUBAL TURE to status to statu   | 4651 ARNO                           | LD AVENUE  | 4651 ARNOLD AVENUE                   |  |   | HILD DEEDE TILLE TOTAL OTHER   | alati alati atar alar diak   |  |
| DO NOT WRITE IN THIS SPACE       4. Fel Number<br>59-2113982       Applied<br>59-2113982         BAVIELLO, MICHAEL A JR<br>1025 FIFT AVENUE NORTH<br>NAPLES, FL 34102       DO NOT WRITE<br>IN THIS SPACE         8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and it<br>the obligations of equipreted agent.       DI 02:08         SIGNATURE       01       02:08       DI         PLE NOWILI FEE IS 3150.00<br>Aftor May 1, 2008 Fee will be \$550.00<br>Aftor May 1, 2008 Fee will be \$550.00<br>Aftor May 1, 2008 Fee will be \$550.00<br>Aftor May 1, 2008 Fee will be \$55.00<br>Aftor May 1, 2008 Fee wi  |                                     |  | t I                                  |  |   |  |                              |  |
| Substant and Address of Current Registered Agent     Substant Address of Current Registered Agent     Substant Address of Current Registered Agent     Substant Address of Current Registered Agent     Certificate of Status Desired     Substant Address of Current Registered Agent     DO NOT WRITE     NAPLES, FL 34102     DO NOT WRITE     NAPLES, FL 34102     Certificate of Status Desired     DO NOT WRITE     NAPLES, FL 34102     Certificate of Status Desired     Substant Address of Current Registered Agent     OUTE Registered agent, or both, in the State of Floride, 1 am familiar with, and in     the obligations of registered agent.     OUTE Registered agent, or both, in the State of Floride, 1 am familiar with, and i     SiGNATURE     Substant address of the statement for the purpose of changing its registered agent, or both, in the State of Floride, 1 am familiar with, and i     SiGNATURE     Substant address of the statement is the statement is agent as the if agents     (NOTE Registered agent, or both, in the State of Floride, 1 am familiar with, and i     SiGNATURE     Substant Address State of Floride, 1 am familiar with, and i     Outer Registered agent, or both, in the State of Floride, 1 am familiar with, and i     SiGNATURE     Substant Address State of Teporter agent     State of Floride, 1 am familiar with, and i     SiGNATURE     Substant Address     SiGNATURE     PD     After Many 1, 2008 Fee will be State.     OFFICERS AND DIRECTORS     The ADVES     NAPLES, FL 34104     NAPLES,  |                                     |  |                                      | , ,<br>∧÷                                | 01082008  | No Chg-P   | CR2E034 (11/0                | 5)   |
| Centificate of Status Desired     Current Registered Apent     Control Registered     Contregent     Control Registered     Control Registered     Control Re  | Ľ                                   | DO NOT WRITE   | IN THIS SPA                          | CE                                       |   |  |                              | Applied For<br>Not Applicable                            |
|  |                                     | s de la companya de la compa | • . • . • •                          | k  |   |  | \$8.75                       | Additional   |
| BAVIELLO, MICHAEL A JR<br>1026 FIFTH AVENUE NORTH<br>NAPLES, FL 34102  B. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Floride. Lam familiar with, and it the obligations of registered agent.  SIGNATURE  File NOWITI FEE IS \$150.00  Aftor May 1, 2008 Fee will be \$550.00  P. Election Campaign Financing  PD  Attor May 1, 2008 Fee will be \$550.00  PC Engleased Agent dyname realises when research  File NOWITI FEE IS \$150.00  Aftor May 1, 2008 Fee will be \$550.00  PC Engleased Agent dyname realises when research  File NOWITI FEE IS \$150.00  Aftor May 1, 2008 Fee will be \$550.00  PC Engleased Agent dyname realises when research  File NOWITI AUSTIN, MARK J  |                                     | 6. Name and Address of Current Re  | gistered Agent                       |  | ne na se tra de la composición de la co | t de la composition de la comp |                              | an earlier and a statement of                            |
| NAPLES, FL 34102  IN THIS SPACE  IN THIS SPACE IN THIS SPA   |                                     |  |                                      |  | DO  | NOT W  | RITE                         | al and Gamma   |
| B. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and it the obligations of registered agent.  DI 0808  SIGNATURE  SIGNATURE  FILE NOWILI FEE 13 3150.00  After May 1, 2008 Fee will be \$550.00  P. Election Campaign Financing Note Frust Fund Contribution  P. D Atter May 1, 2008 Fee will be \$550.00  B. Election Campaign Financing Note Fee AUSTIN, MARK J SIGNATURE PD AUSTIN, MARK J SIGNATURE VPST NAPLES, FL 34104  UDD000779943 .01/14/08-80002-014,158.75  DD ONT WRITE INTERADORSS ITM-SF-2P THE MARE STRETADORSS ITM-SF-2P THE MARE STRETADORS   |                                     |  |                                      | 1.2 million (1.1                         |   |  |                              | 11.11.11.11.11.11.11.11.11.11.11.11.11.                  |
| B. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and i the obligations of registered agent.  SIGNATURE  SIGNATURE  FILE NOWTH FEE IS \$150.00  After May 1, 2008 Fee will be \$550.00  9. Election Campaign Financing Trust Fund Contribution  10.  OFFICERS AND DIRECTORS  10.  PD AUSTIN, MARK J A651 ARNOLD AVE TITLE VPST NAPLES, FL 34104  11.  U00000779343  11.  U00000779343  11.  U00000779343  11.  IN THIS SPACEE  IN THIS SPACE  IN THIS SPACE  IN THIS SPA  |                                     |  |                                      | , .                                      | e at Me a   |  |                              | n tu <sup>n</sup> s rien<br>n 100 sin ten<br>n 100 sin t |
| SIGNATURE  | 8. The above                        | a named entity submits this statement for th   | e purpose of changing its register   | red office or register                   | red agent, or both  |  | , ,                          | 1  |
| Symutral fight or privide runne of while iter applicable         (NOTE: Registerize Agent and struct requilited when reducting)         Date           File NOWILI FEE 13 \$150.00<br>After May 1, 2008 Fee will be \$550.00         9. Election Campaign Financing<br>Trust Fund Contribution.         \$5.00 May Be<br>Added to Fees           IO         OFFICERS AND DIRECTORS         Image: State S  |                                     |  |                                      |  |   |  | niloblob                     |  |
| After May 1, 2008 Fee will be \$550.00       Trust Fund Contribution       Addee to Fees         10.       OFFICERS AND DIRECTORS       International and the state of the st   |                                     | Signature typed or printed name of egistered agent and   | itle II applicable · (NOTE: Register | ed Agent signature required              | t when reinstating)   |  | DATE                         |  |
| ITTLE PD<br>AUSTIN, MARK J<br>4651 ARNOLD AVE<br>ITTY-ST-2P NAPLES, FL 34104<br>ITLE VPST<br>AMAE AUSTIN, MICHAEL J<br>JIREET ADDRESS 4651 ARNOLD AVE<br>ITY-ST-2P NAPLES, FL 34104<br>ITLE AMAE<br>ITTY-ST-2P ITLE<br>AME<br>ITTE TADDRESS<br>ITY-ST-2P ITLE<br>AME<br>ITREET ADDRESS<br>ITY-ST-2P ITLE<br>AME<br>ITTE TADDRESS<br>ITY-ST-2P ITLE<br>AME  |                                     |  | , .                                  | · · · · · ·                              | .00 May Be<br>ed to Fees  |  |                              |  |
| AME TREET ADDRESS<br>TYT-ST-ZIP<br>NAPLES, FL 34104<br>TILE<br>AUSTIN, MICHAEL J<br>4651 ARNOLD AVE<br>NAPLES, FL 34104<br>TILE<br>AME<br>TREET ADDRESS<br>TYT-ST-ZIP<br>TILE<br>AME<br>TREET ADDRESS<br>TYT-ST-ZIP  |                                     |  | RECTORS                              |  | u sa g  | ta <sup>t</sup> uit: <mark>n</mark> , trip:  | and provided by pro-         | 1. They bear they  |
| ITY-ST-ZIP NAPLES, FL 34104<br>TILE VPST<br>AME AUSTIN, MICHAEL J<br>4651 ARNOLD AVE<br>NAPLES, FL 34104<br>TILE AME<br>TREET ADDRESS<br>TY-ST-ZIP<br>TILE<br>AME<br>TREET ADDRESS<br>TY-ST-ZIP<br>TLE<br>AME<br>TREET ADDRESS<br>TY-ST-ZIP  |                                     |  |                                      | ,  |   | ur the second  | We way the stand of the      | and setting the  |
| AME AUSTIN, MICHAEL J<br>TREET ADDRESS<br>ITY-ST-ZIP<br>TLE<br>AME<br>TREET ADDRESS<br>ITY-ST-ZIP<br>TLE<br>AME<br>TREET ADDRESS<br>ITY-ST-ZIP<br>TLE<br>AME<br>TREET ADDRESS<br>ITY-ST-ZIP  | ITY-ST-ZIP                          | NAPLES, FL 34104   |                                      |  | and the star  |  | A BREAK SHELLAND             | the man and the second                                   |
| ITY-ST-ZIP NAPLES, FL 34104<br>ITEAME<br>ITEET ADDRESS<br>ITY-ST-ZIP<br>ITLE<br>AME<br>ITREET ADDRESS<br>ITY-ST-ZIP<br>ITLE<br>AME<br>ITREET ADDRESS<br>ITY-ST-ZIP<br>ITLE<br>AME<br>ITLE<br>AME<br>ITT-ST-ZIP   |                                     |  |                                      |  | The second  |  | a the second day             | ્ર અંતર પ્રદે હતું                                       |
| AME<br>TREET ADDRESS<br>ITY-ST-ZIP<br>TLE<br>AME<br>TREET ADDRESS<br>ITY-ST-ZIP<br>TLE<br>AME<br>FREET ADDRESS<br>ITY-ST-ZIP   |                                     | [  |                                      |  | , > yı  | ·  | '9943<br>)002=014,158        | 75 <sup>-9</sup> 89.95m                                  |
| TREET ADDRESS<br>ITY-ST-ZIP<br>TILE<br>AME<br>TREET ADDRESS<br>ITY-ST-ZIP<br>TLE<br>AME  |                                     |  |                                      |  | •   |  |                              |  |
| TLE AME<br>TREET ADDRESS<br>ITY-SI-ZIP<br>TLE ADDRESS<br>ITY-SI-ZIP<br>TLE AME<br>TLE AME  | TREET ADDRESS                       |  |                                      |  |   |  |                              |  |
| THEET ADDRESS<br>ITY-ST-ZIP<br>TLE<br>AME<br>TLE<br>TLE<br>AME<br>TLE<br>AME   |                                     | ·<br>· · · · · · · · · · · · · · · · · · ·   |                                      | - ;                                      |   | at in the state  | 10 mar 6, 1                  |  |
| ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI-ZIP<br>ITY-SI |                                     |  |                                      | · · · ·                                  | * ·   | •  |                              | Torre and  |
| AME<br>TREET ADDRESS<br>ITY-ST-ZIP<br>ITLE<br>ANDE   |                                     |  |                                      |  | ղ <sup>պ</sup> երով էլ  | า คร.สารกรณาเร   | 等于                           | 14.4 14.4<br>14.1 14.4                                   |
| ITY-ST-ZIP   |                                     |  |                                      | en e |   |  |                              |  |
| TLE<br>AME   |                                     | · ·  |                                      |  | - Axer  | - A  | int with property.           | 4. 15 18 19.   |
| AME AME  | TLE                                 |  |                                      | 1 · · · ,                                |   |  |                              |  |
|  |                                     |  |                                      | ,  | e e de te   |  | ี แรงสุรัตร์ เส              | ** - 内   |
| <ul> <li>Invest-zip</li> <li>I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information supplied with the filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information supplied with the filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information supplied with the filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information supplication supplication</li></ul>  |                                     |  | - HO                                 |  |   |  | <u>к</u> ,                   |  |
|  | indicated<br>of the cor             | on this report or supplemental report is tru<br>poration or the receiver or trustee empower<br>or on an attachment with an address, with   | red to execute this report as requi  | ired by Chapter 607                      | , Florida Statutes  | ; and that my name   | appears in Block 10          | ) or Block 11 if   |
| $\mathbf{IGNATURE:} =$   | indicated<br>of the cor<br>changed, | poration of the receiver or trustee empowe<br>or on an attachment with an address, with  | red to execute this report as requi  | ired by Chapter 607                      | , Florida Statutes  | ; and that my name   | appears in Block 10          | ) or Block 11 if   |