

(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:	(Requestor's Name)
(Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status	(,
(City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status	(Address)
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Certified Copies Certificates of Status	(Business Entity Name)
Certified Copies Certificates of Status	
	(Document Number) -
	Certified Copies Certificates of Status
Special Instructions to Filing Officer:	
Special instructions to Fining Officer.	Special Instructions to Filing Officer
	Special instructions to Fining Officer.

Office Use Only



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04/17/07--01018--004 **35.00

DIVISION OF CORPORATIONS

Cs fliston



April 10, 2007

To Whom It May Concern:

Please file the enclosed Document and return a date stamped copy to my attention. I have enclosed a self address envelope for your convenience.

Should you have any questions, please do not hesitate to contact me. The number I can be reached at is $1-800-235-0337 \times 110$

Sincerely,

Jíll Probst

Corporate Services Department

COVER LETTER

TO: Amendme Division of	ent Section of Corporations					
SUBJECT: ALLTECH, INC. (Name of Corporation)						
DOCUMENT NUMBER: F98000006062						
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:						
	JILL PROBST (Name of Conta	act Person)				
NATIONAL SERVICE INFORMATION, INC (Firm/Company)						
145 BAKER ST (Address)						
MARION OHIO 43302 (City/State and Zip Code)						
For further information concerning this matter, please call:						
(N:	JILL PROBST ame of Contact Person)	at (740) 387-6806 (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 Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301				

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

-	provisions of sections 607.0502, 617 inge is submitted for a corporation of			his
-	r to change its registered office or re	-		
1. The name of t	CH, INC.			
	office address: 3031 CATNIP HILL			
3. The mailing a	ddress (if different): SAME			
4. Date of incorp	poration/qualification: 10/30/1998	Document	number: F980000060	62
5. The name and	street address of the current register tment of State: ELLIOTT, STEVE			
	1121 NW 19TH AVE			2007 APR 17
	CHIEFLAND FL 32626			
6. The name and (if changed):	street address of the new registered	agent (if changed) and	d /or registered office	H G
	NRAI Services, Inc.			
	2731 Executive Park Dri			
	Weston, FL 33331	ntable)		
The street addre as changed will	ss of its registered office and the str be identical.	reet address of the bu	siness office of its register	ed agent,
Such change wa authorized by th	is authorized by resolution duly add the board, or the corporation has been	opted by its board of n notified in writing	directors or by an officer so of the change.)
=	re of an officer or director)	(Pri	earse Lyons. Presidented or typed name and title)	
I hereby accept to a further agree to of my duties, and document is being corporation has	the appointment as registered agen o comply with the provisions of all d I am familiar with and accept the ng filed merely to reflect a change i been notified in writing of this cha	t and agree to act in statutes relative to th obligation of my pos n the registered offic nge.	this capacity, ne proper and complete per sition as registered agent. (e address, I hereby confirm	formance Or, if this 1 that the
Ju H	nature of Registered Agent)	<u>April</u>	10,2007	
U	half of an entity:		(Daile)	

JILL PROBST ASST. SECRETARY

(Typed or Printed Name)

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