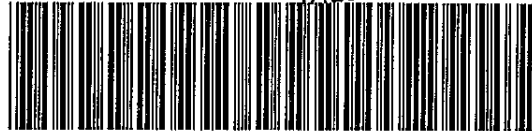


**L01000018203**

04 MAR -8 PM 3:22

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



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02/10/04--01013--021 \*\*35.00

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

**L01-18203**

(Document Number)

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Office Use Only



FLORIDA DEPARTMENT OF STATE  
Glenda E. Hood  
Secretary of State

FILED

04 MAR -8 PM 3:22

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

February 20, 2004

CHARLES SMITH  
609 SHEARWOOD DR.  
FLAGLER BEACH, FL 32136

SUBJECT: FLIGHT RESOURCE GROUP, LLC  
Ref. Number: L01000018203

We have received your document for FLIGHT RESOURCE GROUP, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6094.

Agnes Lunt  
Document Specialist

Letter Number: 604A00011806

TRANSMITTAL LETTER

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04 MAR -8 PM 3:  
SECRETARY OF ST  
TALLAHASSEE, FL

TO: Amendment Section  
Division of Corporations

SUBJECT: FLIGHT RESOURCE GROUP, LLC  
(Name of corporation)

DOCUMENT NUMBER: LO10000018203

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:

CHARLES SMITH  
(Name of person)

~~to~~ F.R.G.  
(Name of firm/company)

609, SHEARWOOD DRIVE  
(Address)

FLAGLER BEACH, FL 32136  
(City/state and zip code)

For further information concerning this matter, please call:

CHARLES SMITH at (386) 439-0556  
(Name of person) (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  
409 E. Gaines Street  
Tallahassee, FL 32399

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR  
BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned member of the limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the limited liability company is: FLIGHT RESOURCE GROUP
2. The mailing address of the limited liability company is : 175, LEHIGH AVENUE  
FLAGLER BEACH, FLORIDA 32136

3. Date of filing/registration in Florida 2-1-2002
4. Document number L01000018203

5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

C.S.C.  
Name  
1201, HAYS STREET  
Address  
TALLAHASSEE, FL 32301  
City, State and Zip

6. The name and address of the new registered agent and/or office:

CHARLES E. SMITH  
Name  
609, SHEARWOOD DRIVE  
Florida street address (P.O. Box NOT acceptable)  
FLAGLER BEACH FL 32136  
City, State and Zip

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Charles E. Smith  
(Signature of a member or authorized representative of a member)

CHARLES SMITH  
(Printed or typed name of signer)

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 obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Charles E. Smith  
(Signature of Registered Agent)

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314