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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

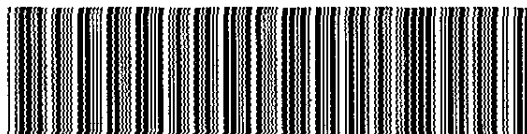
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J. BRYAN OCT 29 2003

AUSLEY & McMULLEN

ATTORNEYS AND COUNSELORS AT LAW

227 SOUTH CALHOUN STREET
P.O. BOX 391 (ZIP 32302)
TALLAHASSEE, FLORIDA 32301
(850) 224-9115 FAX (850) 222-7560

October 23, 2003

Secretary of State
409 East Gaines Street
Tallahassee, Florida 32301

RE: Simango Industries

To Whom It May Concern:

Enclosed please find an executed Statement of Change of Registered Office or Registered Agent or Both for Limited Liability Company in the above referenced company. Also enclosed is a check in the amount of \$25.00 for the fee of such change.

Should you have any questions or concerns please feel free to contact me at your convenience.

Sincerely,



Jennifer M. Heckman

JMH/jm

Enclosure

cc: Jason Brooks

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2003 OCT 24 PM 2:19
JENNIFER M. HECKMAN
TALLAHASSEE, FLORIDA

10/20/2003 15:52

NO. 053 0002

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 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: Simango Industries, LLC
2. The mailing address of the limited liability company is: 2202 N. West Shore Boulevard,
Suite 203, Tampa, Florida 33607

04/23/2002

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3. Date of filing/registration in Florida
4. Document number
5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

Brooks, JasonName210 South Moody Street, Suite 4AddressTampa, Florida 33609City, State and Zip

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

Heckman, Jennifer - Ausley & McMullen, P.AName227 South Calhoun StreetFlorida street address (P.O. Box NOT acceptable)Tall., Fl. 32301FLCity, 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.

Jason Brooks
(Signature of a member or authorized representative of a member)

Jason Brooks

(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.

Jennifer M. Heckman
(Signature of Registered Agent)

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

INHB18(10/99)

FILING FEE: \$25.00

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