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To.

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

Pursuant to the provisions of sections 605.0114 or 605.0116, 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.

	ame of the limited liability company:		
2. (a)		(b)	
17	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing eddress of limited liability company: Note: MAY BE POST OFFICE BOX)
	301 S. SIGNAL BUTTE RD (Office)	30	01 S. SIGNAL BUTTE RD (Office)
	APACHE JUNCTION, AZ 85120	A	PACHE JUNCTION, AZ 85120
	12/23/2002	L0	92000034629
3.	Date of filing/registration in Florida	4.	Document number
5. (a)	VICTOR TROIANO		
	Registered Office Address Offict BE FLORIDA STREE 317 S. TENNESSEE AVENUE	TADDRESS)	
	LAKELAND	FL_33801	
(b)			
	Enter name of NEW Registered Agent and/or NEW Register	ed Office address	27.3 5.1
	NEW Registered Office Address:	red Office address	21.79 5. 12
		red Office address	
	NEW Registered Office Address:	red Office address	21.79 C. 1 - 1 - 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
ле спа: igent w vas/we	NEW Registered Office Address: 1200 South Pine Island Road	FL 33324 aws of the Stat of the registere liability compos s of the limited the limited liabil	te of Florida, it is hereby confirmed that after and office and the business office of the registered any, it is hereby confirmed that the change(s) liability company or as otherwise provided in lity company.
ne coa gent w vas/we he artic	NEW Registered Office Address: 1200 South Pine Island Road Plantation mited liability company is not organized under the large or changes are made, the Florida street address till be identical. Or, in the case of a Florida limited re authorized by an affirmative vote of the members	FL 33324 aws of the Stat of the registere liability compos s of the limited the limited liabil	te of Florida, it is hereby confirmed that after and office and the business office of the registered any, it is hereby confirmed that the change(s)

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 FILING FEE: \$25.00