## 103000004145

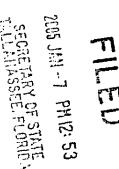
		_ <del></del>				
(Re	questor's Name)					
(Ac	ldress)					
(Ad	dress)					
(Cit	y/State/Zip/Phon	e #)				
(0	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	<b>,</b>				
PICK-UP	WAIT	MAIL				
(Bu	siness Entity Nar	ne)				
•	·	•				
	cument Number)					
000	cament Namber)					
Certified Copies	Certified Copies Certificates of Status					
Special Instructions to	Filina Officer:					
, -,	<b>g</b> = <b>g</b>	1				
ļ						
<u> </u>						

Office Use Only



500041761325

81/07/05--01014--005 \*\*25.00



W3-4145

## 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.

	· - <b>J</b>		_			_
1. The name of the limite						
2. The mailing address of	the limited liability	company is:	942	Wind	lemere	Dr. NW
	R 97304-2					
		,	L03	DAN ON	4145	·
3 February 2003 3. Date of filing/registration in Florida			LO3 000 00 4/45 4. Document number			
5. The name of the registe	red agent and the re	gistered office a	ddress a	s shown c	on the records	s of the
Florida Department of S	State: W. Rick 360 SOUTH	Ilotohor				
	PIOL	Name				
	360 SOUTH	SHORE DE	ZIVE			
	00000	Address				
	SARASOTA Ci	tv State and Zin				
6. The name and address of	of the new registered	a agent and/or or	Tice:			
	Pacific Regis	stered Agents,	, Inc.			
		Name				
	92 Sadberry I		1070	4 11.5		
	Florida street add	ress (P.O. Box N	OT acc	eptable)		
	Quincy,	FL	3235	51	70 E	) )
	City	FL y, State and Zip		-	L CR ECR P	_ 1
If the limited liability comconfirmed that after the cleand the business office of liability company, it is her the members of the limited the operating agreement of the limited that the limited liability comconditions are considered to the limited that the limited liability company and the limited liability company and the limited liability company and liability company.	nange or changes are the registered agent reby confirmed that	e made, the Flori will be identical the change(s) wa	da stree l. Or, in	t address of the case of authorized	of the registe of a Florida l I by an affirm	red office limited native vote of
(Signature of a member or authori	zed representative of a me	mber)				
A. Prame mas	ha oor					
(Printed or typed name of signee)	-age					
I hereby accept the appoing comply with the provision and I am familiar with and Chapter 608, F.S. Or, if the address, I hereby confirm (Signature of Registered Agent)	ntment as registered s of all statutes rela l accept the obligat his document is bei that the limited liab	d agent and agre tive to the prope ions of my positi ing filed to merely pility company ho	re to act r and co on as re y reflect as been	in this ca omplete pe egistered e a change notified in	pacity. I furt erformance o igent as prov in the regist writing of th	her agree to f my duties, ided for in ered office his change.
Charles F. Mathias, Divisio	President	P.O. Roy 6327	Tallah	assee RI	32314	
DIVISIO	ir or Corborgnons		Lanall	いいいししり エエ	J_J	

INHS18(10/99)

**FILING FEE: \$25.00** 

Pacific Registered Agents, Inc. 942 Windemere Dr. NW Salem, OR 97304-2722 (503) 375-9876 Fax: (503) 362-2361

January 3, 2005

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

Re: Linwer Technologies Ltd. Co.

Dear Sir or Madam:

Please file the enclosed Statement of Change of Registered Office or Registered Agent. Evidence should be returned to my attention:

Thank you for your assistance. Please contact me if you have questions.

Very truly yours,

Charles F. Mathias

President

1005 JAN -7 PK 12: 5