

L03 00000 4145

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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TALLAHASSEE, FLORIDA

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**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: LINWER TECHNOLOGIES LTD. CO.  
2. The mailing address of the limited liability company is : 942 Windemere Dr. NW  
Salem OR 97304-2722

3 February 2003  
3. Date of filing/registration in Florida

L03000004145  
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:

W. Rick Fletcher  
Name  
360 SOUTH SHORE DRIVE  
Address  
SARASOTA FL 34234  
City, State and Zip

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

Pacific Registered Agents, Inc.  
Name  
92 Sadberry Road  
Florida street address (P.O. Box NOT acceptable)  
Quincy, FL 32351  
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.

A. Prams  
(Signature of a member or authorized representative of a member)

A. Prams, manager  
(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 F. Mathias  
(Signature of Registered Agent)

Charles F. Mathias, President  
Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

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FLORIDA

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

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