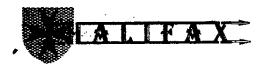
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| (Requestor's Name) (Address) | 500059072205 |
| (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL | 00 12/3501051 Feld **** |
| (Business Entity Name) (Document Number) | 05 (Arms) 01051 Oic **E.J.D. |
| Certified Copies Certificates of Status Special Instructions to Filing Officer: | |
| AL | |

Office Use Only



THE HALIFAX GROUP, LLC

S. Yonge Street Ormond Beach, FL 32174 386-615-2323 (Phone) 386-615-2325 (Fax)

September 8, 2005

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

RE: CORPORATE CHANGES (Document #L03000019756)

Dear Sir:

Enclosed please find the following forms:

- 1. Resignation of Registered Agent for a Limited Liability Company Jaime Girald Check for \$85.00 filing fee.
- 2. Resignation of Manager -- Jaime Girald -- Check for \$25.00.
- 3. Statement of Change of Registered Agent for a Limited Liability Company -- Valerie Treshell -- Check for \$25.00 filing fee.

If you have any questions, please contact me at 386-615-2323. Thank you.

Sincerely,

Rebecca A. Williams

/b

Enclosures

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: 2. The mailing address of the limited liability company is: URMOND BEACH, June 02, 2003 3. Date of filing/registration in Florida 5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State: nderson 6. The name and address of the new registered agent and/or office: JOHN ANDERSON DRIVE Florida street address (P.O. Box NOT acceptable) 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. (Signature of a member or authorized representative of a member) (Printed or typed name of signee) 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. Thereby confirm that the limited liability company has been notified in writing of this change.

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

FILING FEE: \$25.00

(Signature of Registered Agent)