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FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

May 24, 2004

ELITE CAPITAL MANAGEMENT GROUP LLC 611 S FORT HARRISON, STE 353 CLEARWATER, FL 33767

SUBJECT: ELITE CAPITAL MANAGEMENT GROUP LLC

Ref. Number: L03000027486

We have received your document for ELITE CAPITAL MANAGEMENT GROUP LLC. However, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$25.00. Your document will be retained in our pending file. Please return a copy of this letter to ensure that your check is properly credited.

The fee to file the registered agent change is \$25.00.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6025.

Trevor Brumbley Document Specialist

Letter Number: 904A00036194

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.

agent, or both, in the State of Florida.
1. The name of the limited liability company is: ELITE CAPITAL MANAGEMENT Group LLC
2. The mailing address of the limited liability company is: 6/1 S. FORT HARNSON
SUITE # 353 CLEANWATER FL 33767
3. Date of filing/registration in Florida L03000027486 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: EARL LABE E Name Name
6. The name and address of the new registered agent and/or office:
Name 30/3 REGAL OAKS BLVJ. Florida street address (P.O. Box NOT acceptable) PALM HARBOR FL 34684 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.
(Signature of a member or authorized representative of a member)
(Printed or typed name of signee) MANAGING MEMBEN
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.

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

FILING FEE: \$25.00

ered Agent)