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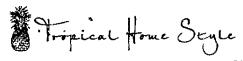


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DIVISION O

DIVISION OF CORPORATIONS



2081 Clematis St. Sarasota, FL 34239 Phone: (941) 362-3185 Fax: (941) 362-3195

October 3, 2003

Dear Division of Corporations,

Enclosed is my "Statement of Change of Registered Office" for LLC. I am in the process of moving my business from one location to another. The registered agent remains the same, myself, Heather V. Ackley. The address of the registered agent has been changed as listed on the enclosed form. I am requesting in addition, to change the PRINCIPAL address of the business as registered with the State, Division of Corporations.

New PRINCIPAL BUSINESS ADDRESS, REGISTERED OFFICE ADDRESS and REGISTERED AGENT ADDRESS:

2081 Clematis St. Sarasota, FL 34239-3904

If you have any questions, please contact me at the following numbers: Home: (941) 362-9411, Business (941) 362-3185, Cell: (941) 356-2806 or email: heather@ackley.net

Sincerely,

Heather V. Ackley, MGR

President

Tropical Home Style, LLC

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	d liability company is: _	Tropical Home	Style, LLC			, <u>i. :</u>
2. The mailing address of						
Englewood, FL 34223	·	-		4	,	
8-21-03		Lo:	3000031298			
3. Date of filing/registrati	on in Florida	4. D	ocument numb	er		
5. The name of the register Florida Department of S	State: Heather V. Ackley		ss as shown on	the records	of the	e
	32 Windsor Drive	Name				
	Englewood, FL 3422	ddress 3 tate and Zip		· · · · · · · · · · · · · · · · · · ·	•	1 - 1
6. The name and address of	of the new registered age	nt and/or office:				
	Heather V. Ackley			4 ,	03	E.
	2081 Clematis St. Na	ame	-	; * *	007	SION
·	Florida street address (P.O. Box NOT	acceptable)		9	777 277 277
	Sarasota,	FL 34239			H	250 250 250 250 250 250 250 250 250 250
	City, Sta	te and Zip		*	က ကဲ့	RATE
If the limited liability com confirmed that after the ch and the business office of liability company, it is her the members of the limited the operating agreement of the company of the limited the operating agreement of the operations of the ope	ange or changes are made the registered agent will eby confirmed that the confirmed that the confirmed that the confirmed liability liability confirmed liability liab	le, the Florida st be identical. On hange(s) was/we otherwise provi npany.	reet address of r, in the case of ere authorized b	the register a Florida lin ov an affirm	ed off mited ative	fice vote of
Heather V. Ackley, Pre	sident/Manager					_
(Printed or typed name of signee)			e de la destrono de l			
I hereby accept the appoint comply with the provisions and I am familiar with and Chapter 608, F.S. Or, if the address, I hereby confirm	ntment as registered age in of all statutes relative to accept the obligations in accept the obligations in the limited liability.	nt and agree to to the proper and of my position a definition and to merely reflection as be	act in this capa d complete perj s registered ag lect a change v en notified in v	city. I furth formance of ent as provid the registed vriting of thi	er ag my d ded fo red oj is cha	ree to uties, or in ffice inge.
(Signature of Registered Agent)		· ·				

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

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