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DIVISION OF CORPORATIONS
OF AUG 21 PM 2: 16

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COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: CPM Properties, LLC	Limited Liability Company)	 <u>-</u>
(Tumino Ox	Emirica Diability Company)	
Dear Sir or Madam:		
The enclosed Registered Agent/Registered	Office Change and fee(s) are submitted for fi	ling.
Please return all correspondence concerning	g this matter to the following:	
Harvey Estes		
(Name of Person)		VISION VISION
CPM Properties, LLC		NYSIGN OF CO
(Firm/Company)		3 8900
12705 Curan Kau Drive		OF STATE
13725 Susan Kay Drive		9 PS
(.130.535)		
Tampa, FL 33613		
(City/State and Zip Code)	· · · · · · · · · · · · · · · · · · ·	
For further information concerning this mat	tter, please call:	
Harvey Estes	at (813) 376-4075	
(Name of Person)	at (813) 376-4075 (Area Code & Daytime Teleph	ione Number)
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	
Enclosed is a check for the following	ng amount:	
\$25 Filing Fee	\$55 Filing Fee & Certified Copy	,

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.

The name of the limited liability company is: <u>CPM Properties</u> , LLC	
2. The mailing address of the limited liability company is: 13725 Susan Kay Drive,	Tampa, FL 33613
9/1/03 3. Date of filing/registration in Florida L0300036 4. Document number	5345
5. The name of the registered agent and the registered office address as shown on the reference and the registered office address as shown on the reference and the registered office address as shown on the reference and the registered office address as shown on the registered office address as a shown of the registered of	ecords of the
1713 Magdalene Manor Drive Address	 ਹੁ
Tampa, FL 33613 City, State and Zip 6. The name and address of the new registered agent and/or office:	O6 AUG 21
Name 13725 Susan Kay Drive, Tampa, FL 33613 Florida street address (P.O. Box NOT acceptable)	PECORPORATIONS 21 PM 2: 16
FL City, State and Zip	-
If the limited liability company is not organized under the laws of the State of Florida, confirmed that after the change or changes are made, the Florida street address of the read and the business office of the registered agent will be identical. Or, in the case of a Flo liability company, it is hereby confirmed that the change(s) was/were authorized by an of the members of the limited liability company or as otherwise provided in the articles or the operating agreement of the limited liability company.	egistered office orida limited affirmative vote
(Righature of a humber or authorized representative of a member) (Prince or typed hather of signes) (Prince or typed hather of signes) I hereby accept the appointment as registered agent and agree to act in this capacity. comply with the provisions of all statutes relative to the proper and complete performand I am familiar with and accept the obligations of my position as registered agent as Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the raddress, I hereby confirm that the limited liability company has been notified in writing	I further agree to nce of my duties, provided for in egistered office g of this change.
(Signature of Registered Agent) Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314	

FILING FEE: \$25.00

INHS18 (8/05)