

L04000011763

Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850) 617-6380

From: Account Name : JOHN K. MCCLURE, P.A.
Account Number : T20000000201
Phone : (863) 402-1888
Fax Number : (863) 402-2436

RECEIVED

2008 JUL 30 AM 8:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
08 JUL 30 AM 9:01

REGISTERED AGENT CHANGE**AGGAR ERGONOMIC DESIGNS, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$35.00

See Schedule
say fee is \$35.00

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J. BRYAN

JUL 31 2008

EXAMINER

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. Name of the limited liability company: Aggar Ergonomic Designs, LLC

2. (a) Principal office address of limited liability company: 211 South Ridgewood Drive
Sebring, Florida 33870
 (Note: MUST BE STREET ADDRESS)

(b) Mailing address of limited liability company: 211 South Ridgewood Drive
Sebring, FL 33870
 (Note: MAY BE POST OFFICE BOX)

2-12-2004
 3. Date of filing/registration in Florida

L 04000011763
 4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Agent:

John K. McClure

Registered Office Address:

230 S Commerce Ave.
Sebring, FL 33870

(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:

NEW Registered Agent:

John K. McClure

NEW Registered Office Address:

(MUST BE FLORIDA STREET ADDRESS)

211 South Ridgewood Dr.
Sebring, FL 33870

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.

John K. McClure
 (Signature of a member or authorized representative of a member)

John K. McClure, Mgrm.
 (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.

John K. McClure
 (Signature of Registered Agent)

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314
 FILING FEE: \$25.00

INHS18 (05/08)

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