## "W5000012209

(Requestor's Name)						
7061 Grand National Drive - Suite 124 Orlando, Florida 32819 -						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
Special Instructions to Filing Officer:						
4/17 MA Ch						
105-12209						

Office Use Only



200055901282

... LYBARE

06/17/05--01906--003 \*\*25.00

## 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 limite	d liability company is:	One-Sto	p-U.S.A., LLC			
2. The mailing address of				al Drive,		
Suite 124, Orlando, Flo						
02/07/2005		र्गक <del>हिं</del> डि	L05000012209			
3. Date of filing/registrati	on in Florida	¥	4. Document number	er		
5. The name of the register Florida Department of	red agent and the regist State: Paul J. Svejda	ered office	address as shown on	the records o	of the	
	7061 Grand Nationa	Name al Drive, S	uite 124	·		•
	Orlando, Florida 326	Address 319 State and Z	lin		ુ	
6. The name and address of	•		1	•	05 JUN	, T
	Alan C. Tilley				7	4
	7061 Grand Nationa	lame Il Drive, Si	uite 124		<b>=</b>	raning.
	Florida street address	(P.O. Box	NOT acceptable)	. जुड़ा इं.	+	
	Orlando	FL 3281		•		
	City, St	ate and Zip	2	•		••
If the limited liability comconfirmed that after the chand the business office of liability company, it is her the members of the limited the operating agreement of (Signature of a member or authority).	the registered agent will the registered agent will be confirmed that the diability company or a f the limited liability co	ide, the Flo I be identic change(s) v s otherwise impany.	orida street address of cal. Or, in the case of was/were authorized be provided in the artice county of the case of was/were authorized by the case of was/were authorized by the case of	the registered a Florida lin	d officenited tive vo zation	e ite of or
Alan C. Tillev				MMISSION # DD 420	0682	

Alan C. Tilley

(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, I hereby confirm that the limited liability company has been notified in writing of this change.

EXPIRES: April 19, 2009

(Signature of Registered Agent)