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October 19, 2005

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

Sunrider Productions, LLC - File No. D1708-00012

Dear Madam or Sir:

Re:

Enclosed please find the original and one copy of a Statement of Change of Registered Office or Registered Agent or Both for the above entity. Our check in the sum of \$25 is also enclosed to cover the filing fee. Please file the Statement of record and return a date-stamped copy to me in the self-addressed, stamped envelope provided for your convenience. If you have any questions, please feel free to contact me.

Thank you.

Very truly yours, UmMarie Bruske

Ann Marie Bruski

Paralegal

amb enclosures

cc: Matthew C. Jones, Esquire (w/attachment)

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PILED
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SECTETARY OF STATE

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.

, , , , , , , , , , , , , , , , , , , ,	Cunsider Productions IIC
	d liability company is: Sunrider Productions, LLC
2. The mailing address of	the limited liability company is: 201 W. Centre Street,
Mahanoy City, PA 179	48-2505
2/15/2005	L05000015648
3. Date of filing/registrati	on in Florida 4. Document number
5. The name of the registe Florida Department of S	red agent and the registered office address as shown on the records of the State:
•	Corporation Service Company
	Name 1201 Hays Street
	Address Tallahassee, Florida 32301-2525 City, State and Zip of the new registered agent and/or office: Henry Winkler Name 100 N.E. 20th Terrace Name
6. The name and address of	of the new registered agent and/or office:
	Henry Winkler
	100 N.E. 20th Terrace
	Florida street address (P.O. Box NOT acceptable)
	Deerfield Beach FL 33441
	City, State and Zip
confirmed that after the chand the business office of	apany is not organized under the laws of the State of Florida, it is hereby hange or changes are made, the Florida street address of the registered office the registered agent will be identical. Or, in the case of a Florida limited reby confirmed that the change(s) was/were authorized by an affirmative vote of d liability company or as otherwise provided in the articles of organization or of the limited liability company.
William G. Brayford, Vi	ce President
(Printed or typed name of signee)	
	intment as registered agent and agree to act in this capacity. I further agree to so of all statutes relative to the proper and complete performance of my duties, a accept the obligations of my position as registered agent as provided for in this document is being filed to merely reflect a change in the registered office also the imited liability company has been notified in writing of this change.
(Signature of Registered Agent)	Willy

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

INHS18(10/99)