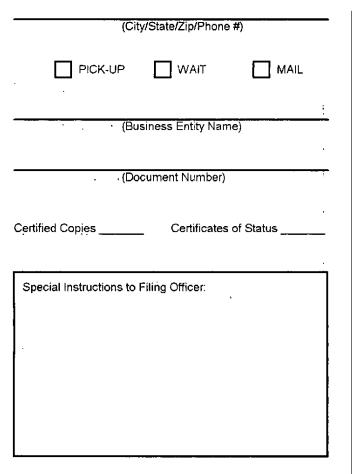
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Sarah Crane

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SEGRETARY OF STATE TABLAHASSEE, FLORIDA

T. CLINE

JUL 17 2009

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:	EXOTIC WOOD DASH L.L.C.
2. (a) Principal office address of limited liability comp	pany:
(Note: MUST BE STREET ADDRESS)	7171 North 9th Avenue, Suite G-1 Pensacola, FL 32504
(b) Mailing address of limited liability company:	
(Note: MAY BE POST OFFICE BOX)	7171 North 9th Avenue, Suite G-1 Pensacola, FL 32504
04/27/2005	L05000042878
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown	on the records of the Florida Dept-of-State:
Registered Agent:	PIERRE ELKHOURI
Registered Office Address:	6058 Electra Lane Pensacola, FL 32507
	95
(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:	
NEW Registered Agent:	Ruby L. Holloway
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	5136 Tulip Street
	Pinellas PARK ,FL33782
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. Signature of a member or authorized representative of a member	
Mark S. Holloway	
Printed or typed name of signee	
I hereby accept the appointment as registered agent a comply with the provisions of all statutes relative to the and I am familiar with and accept the obligations of m Chapter 608, F.S. Or, if this document is being filed to padress, I hereby confirm that the limited liability com	nd agree to act in this capacity. I further agree to e proper and complete performance of my duties, y position as registered agent as provided for in o merely reflect a change in the registered office pany has been notified in writing of this change.
Signature of Registered Agent	
Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00	

INHS18 (05/08)