

FAX-03 2007 THU 04:09 PM

FAX NO.

P. 01

Division of Corporations

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L05000047337

Florida Department of State

Division of Corporations

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To:

Division of Corporations

Fax Number : (850) 205-0380

From:

Account Name : FIELDSTONE LESTER SHEAR & DENBERG

Account Number : I19990000180

Phone : (305) 357-5775

Fax Number : (305) 357-5534

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

REGISTERED AGENT CHANGE

CONQUEST CONDOMS LLC

Certificate of Status	0
Certified Copy	1
Page Count	01
Estimated Charge	\$87.50

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2007 MAY -3 AM 10:59

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**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 limited liability company is: Conquest Condoms, LLC
2. The mailing address of the limited liability company is : 9020 SW 83 Street
Miami, Florida 33173

- 05/12/2005 L05000047337
3. Date of filing/registration in Florida 4. Document number

5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

Robert B. Thompson
Name
9020 SW 83 Street
Address
Miami, Florida 33173
City, State and Zip

6. The name and address of the new registered agent and/or office:

Paul A. Lester
Name
201 ALHAMBRA CIRCLE, Ste 601
Florida street address (P.O. Box NOT acceptable)
Coral Gables FL 33134
City, State and Zip


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 2007 MAY -3 AM 11:00
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

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)

Paul A. Lester
(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.


(Signature of Registered Agent)

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