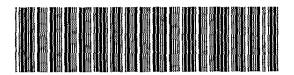
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SECRETARY OF STATE DIVISION OF CORPORATIONS

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J. BRYAN SEP 2, 2, 2006



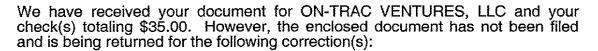
FLORIDA DEPARTMENT OF STATE Division of Corporations

August 24, 2006

DAVID NISSEN ON-TRAC VENTURES, LLC 1806 TOWN PLAZA COURT WINTER SPRINGS, FL 32708

SUBJECT: ON-TRAC VENTURES, LLC

Ref. Number: L05000120974



You completed the wrong form

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6043.

Letter Number: 206A00052182

Joey Bryan Document Specialist



COVER LETTER

TO: Registration Section	·-		
Division of Corporations			
SUBJECT: On-TRAC Venture (Name of Limite	es, LLC		
(Name of Limite	ed Liability Company)		
Dear Sir or Madam:			
The enclosed Registered Agent/Registered Office	Change and fee(s) are submitted for filing.		
Please return all correspondence concerning this r	matter to the following:		
David Nissen (Name of Person)	· · · · · · · · · · · · · · · · · · ·		
		2	DIV
ON-TRAC Ventures, LLC (Firm/Company)		06 SEP 22	SION
1806 Town Plaza Court		22 P	JF COR
(Address)			RY OF STAIL CORPORATIONS
Winter Springs FL 32708 (City/State and Zip Code)	. -	ç.	SKOI
For further information concerning this matter, pl	ease call:		
David Nissen at (Name of Person)	321) 663-1046 (Area Code & Daytime Telephone	Num	shar)
(Ivanie of Ferson)	(Area Code & Daytine Telephone	· IACIII	iberj
STREET/COURIER ADDRESS: Registration Section	MAILING ADDRESS: Registration Section		
Division of Corporations	Division of Corporations		
Clifton Building 2661 Executive Center Circle	P.O. Box 6327 Tallahassee, Florida 32314		
Tallahassee, Florida 32301	rananassee, Florida 32314		
Enclosed is a check for the following an	nount:		
\$25 Filing Fee	\$55 Filing Fee & Certified Copy		

INHS18 (8/05)

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: On -TRAC Venture	5,44
2. The mailing address of the limited liability company is :	
1806 Town Plaza Court, Winter Springs FL	32708
12/14/2005 L05000120	
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 Florida Department of State: David Nissen Name	records of the
Name 5738 Canton Cove, Ste 110 Address Winter Springe FL 32708 City, State and Zip	SLCRETARY DIVISION OF CO
6. The name and address of the new registered agent and/or office:	P 2
Name 1806 Town Plaza Court Florida street address (P.O. Box NOT acceptable)	PM 2: 45
Winter SpringFL 32708 City, State and Zip	
If the limited liability company is not organized under the laws of the State of Florida confirmed that after the change or changes are made, the Florida street address of the and the business office of the registered agent will be identical. Or, in the case of a Fl liability company, it is hereby confirmed that the change(s) was/were authorized by as of the members of the limited liability company or as otherwise provided in the articl or the operating agreement of the limited liability company.	registered office lorida limited
(Signature of a member or authorized representative of a member)	-
David Vissen (Printed or typed name of signee)	
I hereby accept the appointment as registered agent and agree to act in this capacity comply with the provisions of all statutes relative to the proper and complete perform and I am familiar with and accept the obligations of my position as registered agent a Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the address, I hereby confirm that the limited liability company has been notified in writing	. I further agree to ance of my duties, is provided for in registered office ng of this change.
(Signature of Registered Agent)	