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D. BRUCE

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EXAMINER

COVER LETTER

Division of Corporations SUBJECT: FLYING FISH TRADING COMPANY OF FORT MYERS BEACH, Name of Limited 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 matter to the following: CARLA(CARUSO)GREEN Name of Person FLYING FISH TRADING COMPANY OF FORT MYEE Firm/Company 2471 ESTERO BLVD Address FORT MYERS BEACH, FL 33931 City/State and Zip Code flyingfishtrading@hotmail.com

E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Carla (Caruso) Green Name of Person Area Code & Daytime Telephone Number STREET/COURIER ADDRESS: **MAILING ADDRESS:** Registration Section Registration Section **Division of Corporations Division of Corporations** Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, Florida 32314 Tallahassee, Florida 32301 Enclosed is a check for the following amount: \$25 Filing Fee \$55 Filing Fee & Certified Copy

TO: Registration Section

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: FLYING FIS | SH TRADING COMPANY OF FORT |
|--|--|
| 2. (a) Principal office address of limited liability company | y: |
| (Note: MUST BE STREET ADDRESS) | 2471 ESTERO BLVD |
| (b) Mailing address of limited liability company: | FORT MYERS BEACH, FL 33931 |
| (Note: MAY BE POST OFFICE BOX) | |
| AUGUST 24, 2006 | L06000084660 |
| 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: | PETER E PINE |
| Registered Office Address: | 4263 BAY BEACH LANE #517 |
| | FORT MYERS BEACH, FL 33931p |
| (b) Enter name of <u>NEW Registered Agent</u> and/or <u>NE</u> | W Registered Office address: |
| NEW Registered Agent: | CARLA(CARUSO)GREEN |
| NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS) | 2471 ESTERO BLVD |
| | FORT MYERS BEACH ,FL 33931 |
| 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. | |
| CARLA(CARUSO)GREEN | F.C. |
| Printed or typed name of signee | INTERIOR D |
| I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the property and I am familiar with and accept the obligations of my post Chapter 608, F.S. Or, if this document is being filed to me address, I hereby confirm that the limited liability company with the company and the control of the company and the control of the co | gree to act in this capacity. I further agree to oper and complete performance of my duties, sition as registered agent as provided for in rely reflect a change in the registered office y has been notified in writing of this change. |
| Signature of Registered Agent | |