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COVER LETTER

Division of Corporations SUBJECT: Solartek, LLC		
SUDMOTE Solortok II C		
CHIPTHON Colortok II C		
SUBJECT: Solartek, LLC		
Name of Limited Liability Company		
Dani Circa Madama		
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:		
Bruce Thomas		
Name of Person		
Solartek, LLC		
Firm/Company		
672 Brechin Drive		
Address		
Winter Park, Florida 32792		
City/State and Zip Code		
hruno@colortok.com		
bruce@solartek.com E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call:		
Day 20 7 10 10 10 10 10 10 10 10 10 10 10 10 10		
Bruce Thomas at (407) 810-4811 Name of Person Area Code & Daytime Telephone Number		
Name of Follows		
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 \$25 Filing Fee & Certified Copy		

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.

Name of the limited liability company:	Solartek, LLC
2. (a) Principal office address of limited liability compa	any:
(Note: MUST BE STREET ADDRESS)	672 Brechin Drive Winter Park, Florida 32792
(b) Mailing address of limited liability company:	F. 22
(Note: MAY BE POST OFFICE BOX)	672 Brechin Drive Winter Park, Florida 32792
April 23, 2008	L08000041080
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown of	on the records of the Florida Dept. of State:
Registered Agent:	Bruce Thomas
Registered Office Address:	1021 W. New Hampshire St. Orlando, FL 32804
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>N</u> <u>NEW</u> Registered Agent:	EW Registered Office address: Bruce Thomas
<u>NEW</u> Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	672 Brechin Drive Winter Park ,FL 32792
If the limited liability company is not organized under the confirmed that after the change or changes are made, the and the business office of the registered agent will be idliability company, it is hereby confirmed that the change of the members of the limited liability company or as other operating agreement of the limited liability company. Signature of a member or authorized representative of a member	e Florida street address of the registered office
Bruce Thomas	
Printed or typed name of signee	
I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the and I am familiar with and accept the obligations of my Chapter 608, F.S. Or, if this document is being filed to address, I hereby confirm that the limited liability comp	d agree to act in this capacity. I further agree to proper and complete performance of my duties, position as registered agent as provided for in merely reflect a change in the registered office any 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