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FLORIDA DEPARTMENT OF STATE Division of Corporations

February 27, 2009

TRACTIL ENTERPRISES, LLC 1922 ARBOR PARK DR. WINTER PARK, FL 32789

SUBJECT: TRACTIL ENTERPRISES, LLC

Ref. Number: L08000059384

We have received your document for TRACTIL ENTERPRISES, LLC, however, upon receipt of your document no check was enclosed. Please return your document along with a check or money order made payable to the Department of State for \$25.00.

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) 245-6097.

Marsha Thomas Regulatory Specialist II

Letter Number: 009A00006931



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.

in the State of Florida.	
1. Name of the limited liability company: Trach	1 Enterprises, LC
2. (a) Principal office address of limited liability compar (Note: MUST BE STREET ADDRESS)	ny: 10702 Spring Bick Trail
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	Orlande, Februs Buck Ivail
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown of	n the records of the Florida Dept. of State:
Registered Agent:	Elizabeth E. Berchaus
Registered Office Address:	Elizakath E. Beriengus 3 117 E. Amelia St. 23 Crianoc, Fl. 3001
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NI</u>	EW Registered Office address:
NEW Registered Agent:	Elizabeth B. Megale
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	Wands FL 3/875
If the limited liability company is not organized under the that after the change or changes are made, the Florida stroffice of the registered agent will be identical. Or, in the hereby confirmed that the change(s) was/were authorized liability company or as otherwise provided in the articles limited liability company.	eet address of the registered office and the business
(Signature of a member or authorized representative of a member) (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 p am familiar with and accept the obligations of my position F.S. Or, if this document is being filed to merely reflect a confirm that the limited liability company has been notification.	agree to act in this capacity. I further agree to roper and complete performance of my duties, and I n as registered agent as provided for in Chapter 608, a change in the registered office address, I hereby ed in writing of this change.

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