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NUMBER OF CERTIFICATES REQUESTED	
TOTAL AMOUNT OWED: 25°C CHECK NUMBER: 2653 PLEASE CONTACT TINA AT 850-508-1891 FOR ANY PROBLEMS OR INFORMATION ON THIS MATTER.	
Thank you!	
Tina Goff President	

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, 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.

Note: MUST BE STREET ADDRESS) Remburg Court 10, 2008 Re of filing/registration in Florida 11, Handal, Jr. 12, Fice Address (MUST BE FLORIDA STR. 14, Porate Drive, Suite 208 15, Porate Prive, Suite 208	Lak 4. ds of the Florida Dept. EET ADDRESS)	(Note: MAY BE POST 11 Luxemburg Court ke Worth, FL 33467 000101814 Document number of State:	OFFICE BOX
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NEW Registered Agent and/or NEW Regis	tered Office address:		
kwiersky Cohen			
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	ered Office Address: Kemburg Court Arth Ty company is not organized under the sare made, the Florida street addrestal. Or, in the case of a Florida limit	ered Office Address: Acemburg Court Arth The state of the State of the Florida Street address of the registere of the case of a Florida limited liability companion.	ered Office Address: kemburg Court

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