(Requestor's Name) (Address) 000184818870 (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL 10/05/10--01002--016 **25.00 (Business Entity Name) (Document Number) **Certified Copies** Certificates of Status ____ Special Instructions to Filing Officer:

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OCT - 6 2010

EXAMINER

2 4

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:	ick Systems, LLC
2. (a) Principal office address of limited liability company:	
(Note: MUST BE STREET ADDRESS)	581 Tarawood Dr orlando, FL 32819
(b) Mailing address of limited liability company:	
(Note: MAY BE POST OFFICE BOX)	5811 Tarawood Dr Orlando, Fr 32819
9/26/2010	L0900009022
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:	David B. Waterhouse
Registered Office Address:	5811 Tarawood Dr orlando, Fr 32818
	AR CI
(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:	
NEW Registered Agent:	David B Waterneus ein
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	Original St. 32819
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. Signature of a member or authorized representative of a member	
Davis Waterhouse	
Printed or typed name of signee I hereby accept the appointment as registered agent and as comply with the provisions of all statutes relative to the proving and I am familiar with and accept the obligations of my post Chapter 608, F.S. Or, if this document is being filed to mer address, I hereby confirm that the limited liability company Signature of Registered Agent	gree to act in this capacity. I further agree to per and complete performance of my duties, ition as registered agent as provided for in ely reflect a change in the registered office has been notified in writing of this change.

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