

MAR-23-2011 12:12 Division of Corporations Florida Department of State

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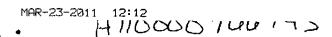
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STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

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: BREAK FREE.	SOLUTION LLC
2. (a) Principal office address of limited liability compan	y: 1202 SE 8th PL, Ste B
(Note: MUST BE STREET ADDRESS)	Cape Coral, Florida 33990
(b) Mailing address of limited liability company:	1202 SE 8th PL, Ste B
(Note: MAY BE POST OFFICE BOX)	Cape Coral, Florida 33990
11/29/2010	L10000122479
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:	Marie B. Code, Esq.
Registered Office Address:	1202 SE 8TH PL STE B CAPE CORAL FL 33990
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NE</u>	W Registered Office address:
NEW Registered Agent:	Business Filings Incorporated
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	1203 Governors Square Blvd, Suite 101,
	Tallahassee .Fl_ 32301-2960
If the limited liability company is not organized under the continued that after the change or changes are made, the liand the business office of the registered agent will be identified liability company, it is hereby confirmed that the change(s of the members of the limited liability company or as other or the operating agreement of the limited liability company. Significant in the or approximation of the limited liability company.	lorida street address of the registered office tical. Or, in the case of a Florida limited) was were authorized by an affirmative vote rwise provided in the articles of organization
Chear R. Beavis	
Printed or typod name of signes I hereby accept the appointment as registered agent and comply with the provisions of all standes relative to the pray and I am familiar with and accept the obligations of my post hapter 608. F.S. Or, if this document is being filed to me address. I hereby confirm that the limited liability company.	ngree to act in this capacity. Sucher agree to oper and complete performancein my dities, situon as registered agent as proceedings in many reflect a change in the residence diffice to has been notified in writing this change.
Signature of Registered Agent	iporated $\mathcal{L}^{\mathcal{R}}$ ω
Division of Corporations, P.O. Box 63 FILING FEE: S. NHS18 (05:08)	127, Tallahassee, FL 32314
Suppose (Const.)	77 0 3

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