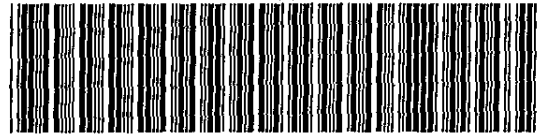


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FLORIDA STATE  
TALLAHASSEE, FLORIDA



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TO: Amendment Section  
Division of Corporations

DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA

SUBJECT: Karawood, L.C.  
(Name of corporation)

DOCUMENT NUMBER: L98000001580

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

William R. Smith, Esquire  
(Name of person)

(Name of firm/company)

8191 College Parkway, #204  
(Address)

Fort Myers, FL 33919  
(City/state and zip code)

For further information concerning this matter, please call:

William R. Smith, Esquire at ( 239 ) 482-8511  
(Name of person) (Area code & daytime telephone number)

Enclosed is a \$35.00 check made payable to the Department of State.

**Mailing Address:**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**  
Amendment Section  
Division of Corporations  
409 E. Gaines Street  
Tallahassee, FL 32399

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.

FILED  
08, Florida Statutes,  
03 AUG 20 PM 2:40  
of the State of  
or both, in the State  
TALLAHASSEE, FLORIDA

- (Capacity)

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE AND MAIL TO:  
DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314