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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: INTERNATIONAL MORE (Name of Limited Lie	TEACE SERVICES LLC ability Company)
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Char	nge and fee(s) are submitted for filing.
Please return all correspondence concerning this matter	r to the following:
Toe CAMPAROTTA (Name of Person)	
INTERNATIONAL MORTENCE SERV (Firm/Company)	nces LCC
2407 Hwy 71 SUTTE 74013	<u> </u>
SPAINS LAKE HEIGHTS NT OF (City/State and Zip Code)	
For further information concerning this matter, please of	call:
Toe CRAPHIOTH at (73) (Name of Person)	(Area Code & Daytime Telephone Number)
Registration Section Division of Corporations Clifton Building	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
Enclosed is a check for the following amount	: :
\$25 Filing Fee	\$55 Filing Fee & Certified Copy

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. The name of the limited liability company is: INTRINATIONAN MONTHA SCAULE
2. The mailing address of the limited liability company is: 3467 Hwy 71 Suite 2405
SPRING LAKE HEIGHTS, NIT OTIGZ
2/14/05 MOSBOBB895
3. Date of filing/registration in Florida 4. Document number
5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State: Mamon Mame Name Name April 711 Hillsborough 33062 City, State and Zip
6. The name and address of the new registered agent and/or office:
PNOF W. Hennedy 1404 James Bay Rd. Florida street address (P.O/Box NOT acceptable) Palm Beach Candant Ft 3340/ City, State and Zip
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 themselvers of the limited liability company or as otherwise provided in the articles of organization or the operating affirment of the limited liability company. Signature if a member or authorized representative of a member) (Printed or typed name of signee)
I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this accument is being filed to merely reflect a change in the registered office address, Therefore confirm that the limited liability company has been notified in writing of this change. (Signature of Registered Agent)

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