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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: PFENT HOLDINGS, LI (Name of	LC Limited Liability Company)
Dear Sir or Madam:	
The enclosed Registered Agent/Registered	Office Change and fee(s) are submitted for filing.
Please return all correspondence concerning	g this matter to the following:
MELANIE DOYAL (Name of Person)	<u> </u>
CORPORATE DIRECT, INC. (Firm/Company)	
2248 MERIDIAN BLVD., STE. H (Address)	
MINDEN, NV 89423	
(City/State and Zip Code)	
For further information concerning this mat	ter, please call:
MELANIE DOYAL	at (775) 782-1307
(Name of Person)	(Area Code & Daytime Telephone Number)
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
Enclosed is a check for the followi	ing 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 limit	ed liability company	is: PFENT HOLDI	NGS, LLC		
2. The mailing address of	of the limited liabilit	y company is : 60 E	AST SIMPSON AVE.		
JACKSON, WY 83001					
10/25/2005		Mo	05000005996		
		Document number	 ,		
5. The name of the regist Florida Department of		egistered office add	ress as shown on the recor	ds of	the
*	i i	NCORPORATI	ED		
	236 EAST 6TH	Name AVENUE			
		Address		_	렲
TALLAHASSEE, FL 32303)7 S	SEC	
	C	ity, State and Zip		Ť	22
6. The name and address	of the new registere	ed agent and/or offic	e:	SEP 18	HANN HANN
	GERRI DETWEILER			AM 11: 27	
	1037 GREYSTO	Name			ZATA AATA
		ress (P.O. Box NO)	Γ acceptable)	[]	GKS
	SARASOTA	FL 34232			
	Cit	y, State and Zip			
confirmed that after the c	change or changes are the registered agen ereby confirmed that mited liability computed the limited liab	re made, the Florida it will be identical. (it the change(s) was/any or as otherwise bility company.	of the State of Florida, it is street address of the regis Or, in the case of a Florida were authorized by an affi provided in the articles of	torad	office

DAVID I PEENT

DAVID J. PFENT

(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 document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Vierri Motuveiler (Signature of Registered Agent)