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SUITE 402, 4440 PGA BOULEVARD
PALM BEACH GARDENS, FLORIDA 33410

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Examiner's Initials

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1(Corporation Name) 2.	(Document #)	. ≟ /*
(Corporation Name)	(Document #)	· · · · · · · · · · · · · · · · · · ·
3. (Corporation Name)	(Document #) FILE AHASSEE	
(Corporation Name) Walk in Pick up time Mail out Will wait	(Document #) Certified Copy & Photocopy Certificate of Status	. <u></u> -
NEW FILINGS Profit Not for Profit Limited Liability Domestication Other OTHER FILINGS Annual Report Fictitious Name	AMENDMENTS Amendment Resignation of R.A., Officer/Director Change of Registered Agent Dissolution/Withdrawal Merger REGISTRATION/QUALIFICATION Foreign Limited Partnership Reinstatement	-
	Trademark Other	

CR2E031(7/97)

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:

Cyclo Industries IIC

1. The name of the limited liability company is:Cyc	lo Industrie	s, LLC		
2. The mailing address of the limited liability company is:	10190 River:	side Dri	vė	
	Palm Beach	Gardens,	FL	33410
March 27, 1995	м95000000	0069		
3. Date of filing/registration in Florida	4. Document nu	mber		··
5. The name of the registered agent and the registered office Florida Department of State:	address as shown	on the recor	ds of t	he
CT Corporation	System	-		
1200 South Pir Address	e Island Rd.	· ·		
Plantation, FI City, State and 2	Zip .			2
6. The name and address of the new registered agent and/or	office:	ASS	, 28 TAR)	, ====================================
Michael A. Sla Name 4440 PGA Blvd, Florida street address (P.O. Box	Ste. 402	KEE, FLORIDY		
Palm Beach Gardens	- ,			, " '
City, State and Zip	33410			
If the limited liability company is not organized under the la confirmed that after the change or changes are made, the Flo and the business office of the registered agent will be identically company, it is hereby confirmed that the change(s) with the members of the limited liability company or as otherwise the operating agreement of the limited liability company. (Signature of a member or authorized representative of a member) Gary L. Ouellette	rida street address al. Or, in the case was/were authorize	of the registe of a Florida d by an affin	ered of limite mative	ffice d vote of
(Printed or typed name of signoe)			_	د. م
I hereby accept the appointment as registered agent and ag comply with the provisions of all statutes relative to the prov and I am familiar with and accept the obligations of my post Chapter 609, Or, if this begument is being filed to mere address, I hereby confirm that the limited liability company	per and complete pi ition as registered a elv reflect a change	erformance of agent as pro- in the regis	of my i vided j tered o	duties s', for in \$ office\$
(Signature of Registered Agenty	7 Tollohanan DF	22214		,
Division of Corporations, P.O. Box 632	i, i auanassee, FL	32314		

FILING FEE: \$25.00

DNHS18(10/99)