

N020000001458

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: MOLINO SADDLE CLUB, INC.
(Name of corporation)

DOCUMENT NUMBER: N02000001458

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:

ROWLAND L BUSSLER JR
(Name of person)

MOLINO SADDLE CLUB, INC.
(Name of firm/company)

8150 N. HWY 29
(Address)

MOLINO, FL 32577
(City/state and zip code)

For further information concerning this matter, please call:

CHRISTINE D BUSSLER at (850) 587-4213
(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

FILED
02 NOV - 7 AM '03
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CA
Change

800007688898--3
-09/12/02--01037--009
*****35.00 *****35.00

X00789, 00709, 00672
9/19/02



FLORIDA DEPARTMENT OF STATE

Jim Smith
Secretary of State

September 19, 2002

Rowland L. Bussler Jr.
Molino Saddle Club, Inc.
8150 N. Hwy 29
Molino, FL 32577

SUBJECT: MOLINO SADDLE CLUB INC.
Ref. Number: N02000001458

We have received your document for MOLINO SADDLE CLUB INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6907.

Annette Ramsey
Document Specialist

Letter Number: 002A00053499

RECEIVED
02 NOV -6 AM 9:43
DIVISION OF CORPORATIONS

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED
AGENT OR BOTH FOR CORPORATIONS**

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.

1. The name of the corporation: MOLINO SADDLE CLUB, INC.
2. The principal office address: 8150 N HWY 29
MOLINO FL 32577
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 28 Feb 2002 Document number: NO20000001458
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

BUSINESS FILINGS, INC.
1000 West Avenue Suite 1114
MIAMI BEACH FL 33139

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

ROWLAND L. BUSSLER JR
8150 N HWY 29
(P.O. Box or personal mailbox NOT acceptable)
MOLINO FL 32577

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

Christine D Bussler
(Signature of an officer, chairman or vice chairman of the board)

CHRISTINE D BUSSLER, PRES
(Printed or typed name and title)

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 obligation of my position as registered agent. On, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

[Signature]
(Signature of Registered Agent)

3 NOV 2002
(Date)

If signing on behalf of an entity:

(Typed or Printed Name)

(Capacity)

*** FILING FEE: \$35.00 ***

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