(Re	questor's Name)	<u>.</u>			
(Address)					
(Ad	dress)				
(Cit	y/State/Zip/Phone	e #)			
PICK-UP	WAIT	MAIL			
(Business Entity Name)					
(Document Number)					
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TROCERES APR 1.5 2009.



National Registered Agents, Inc. 11600 College Boulevard Suite 210 Overland Park, KS 66210 800.550.6724 Fax 913.851.0713

April 9, 2009

Florida Department of State Division of Corporations PO Box 6327 Tallahassee, FL 32314

RE:

Flappa, Inc.

Change of Registered Office and Registered Agent

Dear Sir/Madam,

For the purposes of changing the registered office and registered agent of the above captioned, Flappa, Inc., please find enclosed, in duplicate, a Statement of Change of Registered Office or Registered Agent accompanied by our check in the amount of Amount of \$35.00.

Please proceed with the filing of the enclosed, returning official receipts and evidence in the enclosed envelope.

Thank you in advance for your cooperation in this matter.

Sincerely,

Matt Thompson

National Registered Agents, Inc.

Enclosure - Check

COVER LETTER

TO:	Amendment Section Division of Corporations			
SUBJE	CCT: Flappa, Inc. (Name of Corporation)			
DOCU	MENT NUMBER: N04000010152			
	closed Statement of Change of Registered Office/Agent and fee are submitted for filing.			
Please	return all correspondence concerning this matter to the following:			
	Matt Thompson (Name of Contact Person)			
National Registered Agents, Inc.				
(Firm/Company)				
11600 College Boulevard, Suite 210 (Address)				
	Overland Park, KS 66210 (City/State and Zip Code)			
For fur	ther information concerning this matter, please call:			
	Matt Thompson at (800) 550-6724 (Name of Contact Person) (Area Code & Daytime Telephone Number)			
Enclos	ed 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 Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301			

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

statement of cha	nge is submitted for a corporation (7.0502, 607.1508, or 617.1508, Florida Statutes, organized under the laws of the State of Florida registered agent, or both, in the State of Florida.	this		
1. The name of t	he corporation:	Flappa, Inc.	Flappa, Inc.		
	office address: 4000 Central Flo				
	FL 32816-3600 US				
3. The mailing a	ddress (if different):				
4. Date of incom	poration/qualification: 10/27/2004	Document number: N0400010)152		
5. The name and		ered agent and registered office on file with the	e		
	Brian H Wormwood		므		
Chesta	4000 Central Florida Bl	vd.	NISION A		
Statistical and appropriate the second control of the second contr	Orlando, FL 32816-360	0 US	SECRETARY CORPORATION NISION OF APR 13 AMII: 1'		
6. The name and (if changed):	I street address of the new registered	d agent (if changed) and /or registered office	AH!		
NRAI Services, Inc.					
2731 Executive Park Drive, Suite 4 (PO. Box NOT acceptable)					
	Weston, FL 33331	-cpuoie;			
		street address of the business office of its regist			
Such change w authorized by t	as authorized by resolution duly a he board, or the corporation has be	dopted by its board of directors or by an officer een notified in writing of the change.	so		
` •	ure of an officer or director)	Michael G. Steger, President (Printed or typed name and title)			
I hereby accep. I further agree of my duties, a document is be corporation ha NEM Service	s been nourced in writing of this cr		performance Or, if this irm that the		
By: Matt That Is	rumbbin ignature of Registered Agent) son, Assistant Scuretary	04/09/09 (Bute)			
If signing on b	ehalf of an entity:				
NRAI Sem	CUS, INC. Typed or Printed Name)				

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