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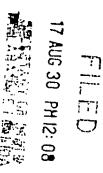
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COVER LETTER

Division of Corporations			
SUBJECT: LORENCE, NC Name of Corporation			
DOCUMENT NUMBER: P 0000011757			
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:			
LOVEN Gray Name of Contact Person LORENEE, INC Firm/Company			
Firm/Company			
1409 SE 46th LN. #205			
Cape Coral, FL 33904			
FINANCE @ LORENEE. COM E-mail address: (to be used for future annual report notification)			
For further information concerning this matter, please call:			
Loren Gray Name of Contact Person at (305) 522-3522 Area Code & Daytime Telephone Number			
Name of Contact Yerson 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 Clifton Building 2661 Executive Center Circle			

Tallahassee, FL 32301

ýs.

Amendment Section

TO:

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: Lovence, Inc
2. The principal office address: 1211 Miramar Street, Suite 1
Cape Coral, FL 33904
3. The mailing address (if different): 1409 SE 416th LN, #205
Cape Coral, FL 33904
4. Date of incorporation/qualification:02\b2\2000 Document number:\200000 [1757
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)
Sandra Racicot
12004 Myrtle Oak CH
Palm Beach Grardens, FL 33410
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): Loren Gray 1409 SE 46th LN, # 205 Cape Coval, FL 33 904
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.
1 Loren Gray
Signature of in officer or director I have by 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. Or, 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 of Registered Agent Date Date
Loren Gray
Typed or Printed Name

* * * FILING FEE: \$35,00 * * *