PDDDDJS579

ATTORNEY AT LAW
CERTIFIED FAMILY LAW MEDIATOR

MAIN OFFICE: 531 NORTH BAY STREET EUSTIS, FLORIDA 32726 TEL: (352) 357-0770 FAX: (352) 357-0818

PLEASE REPLY TO: POST OFFICE BOX 680 EUSTIS, FLORIDA 32727-0680

May 16, 2001

BRANCH OFFICE:

10935 S.E. 177TM PLACE, SUITE 205

SUMMERFIELD, FLORIDA 34491

TEL: (352) 347-0033

FAX: (352) 347-1464

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-05/18/01--01109--013 *****35.00 *****35.00

Florida Department of State Division of Corporations Post Office Box 6327 Tallahassee, Florida 32314

Re:

Sorrento Metal Works, Inc. Charter No. P00000015579

Dear Sirs:

In regard to the above, enclosed please find Statement of Change of Registered Office or Registered Agent and check in the amount of \$35.00 for filing this Statement of Change. Please return a file stamped copy to me in the enclosed stamped-addressed envelope.

Thank you for your attention to this matter.

Soft-DI MR

Very truly/yours,

LAWRENCE J. SEMENTO

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LJS/sc Enclosures

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, the undersigned corporation organized under the laws of the State of Florida
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 corporation is: Socreato Metal Works, Inc.
2. The mailing address of the corporation is: 24149 Adair Ave., Sorrento, FL. 32776
3. Date of incorporation/qualification: 2/14/00 Document number: P00000015579
4. The name and address of the current registered agent and office:
Capital Compection, Inc. 417 E. Vivginia St., Juite 1 Tallahassee PL 32302 S. The name and address of the new registered agent and office: (P.O. Box Not Acceptable) Robin M. Stenstrom 24149 Adair Ave. Sorrento, FL. 32776
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. (Signature of an officer, chairman or vice chairman of the board) (Date)
Robin M. Stenston
Having been named as registered agent and to accept service of process for the above stated corporation, 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.
(Signature of Registered Agent) If signing on behalf of an entity:
(Typed or Printed Name) (Capacity)
* * * FILING FEE: \$35.00 * * *
CR2E045(7/97)

P.O. Box 6327

TALLAHASSEE, FL 32314

DIVISION OF CORPORATIONS