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Division of Corporations

FLORIDA HOLLAND FLORIDA

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Florida Department of State  
Division of Corporations  
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To:

Division of Corporations  
Fax Number : (850)205-0380

From:

Account Name : JAM MARK LIMITED  
Account Number : I20000000112  
Phone : (305)789-7758  
Fax Number : (305)789-7799

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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REGISTERED AGENT CHANGE

GUNAS.COM, INC.

Certificate of Status	0
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RA Change

01/04/05

DC

**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: Gunas.com, Inc.
2. The principal office address: 1867 Caravan Trail, #105  
Jacksonville, Florida 32216
3. The mailing address (if different): \_\_\_\_\_

4. Date of incorporation/qualification: 6/01/2000 Document number: P00000053400

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

Motolaw, Inc.50 North Laura Street, Suite 2500Jacksonville, Florida 32202

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

Intrastate Registered Agent Corporationc/o Holland & Knight LLP, 701 Brickell Avenue, Suite 300(P.O. Box NOT acceptable)Miami, Florida 33131

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.

Michael Gravette  
(Signature of an officer or director)

Michael Gravette / President  
(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. 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.

James T. Mann VP  
(Signature of Registered Agent)

December 13, 2004  
(Date)

If signing on behalf of an entity:

Intrastate Registered Agent Corporation(Typed or Printed Name)

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

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

\*\* TOTAL PAGE.02 \*\*

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