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COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: All In One Ventures, Inc.

Name of Corporation

DOCUMENT NUMBER: P0000067178

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:

Lisa A. Herrero

Name of Contact Person

All In One Ventures, Inc.

Firm/Company

7760 C.R. 109D

Address

Lady Lake, FL 32159

City/State and Zip Code

lisa.herrero1@yahoo.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Lisa Herrero

863 (673-006

Name of Contact 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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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

Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314