P0000076139

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COVER LETTER

TO:	TO: Amendment Section Division of Corporations		
SUBJI	ECT: SKYS THE LIMIT INTERNATIONAL,	INC tion)	
DOCU	UMENT NUMBER:_ P00000076139		
The en	nclosed Statement of Change of Registered Office/Ager	nt and fee are submitted for filing.	
Please	return all correspondence concerning this matter to the	following:	
	Amy H. Eichman (Name of Contact P	erson)	
	Shapiro, Blasi, Wasserman, & Gora, (Firm/Company		
	7777 Glades Road, Suite 400 (Address)	· · · ·	
	Boca Raton, FL 33444 (City/State and Zip	Code)	
For fur	rther information concerning this matter, please call:		
Amy H	H. Eichman at ((Name of Contact Person)	561 477-7800 (Area Code & Daytime Telephone Number)	
Enclose	sed is a \$35.00 check made payable to the Department of	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	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this ange is submitted for a corporation organized under the laws of the State of Florida er to change its registered office or registered agent, or both, in the State of Florida.			
1. The name of	the corporation: SKYS THE LIMIT INTERNATIONAL, INC			
	2. The principal office address: 1395 NW 17TH AVE. STE. 109 DELRAY BEACH FL 33445			
3. The mailing a	address (if different):			
4. Date of incor	poration/qualification: 8/10/2000 Document number: P00000076139			
	d street address of the current registered agent and registered office on file with the rtment of State:			
	Brenda Trapp			
	1395 NW 17TH AVE. STE. 109			
	DELRAY BEACH FL 33445			
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered of the new registered agent (if changed) and /or registered of the new registered agent (if changed) and /or registered of the new registered agent (if changed) and /or registered of the new registered agent (if changed) and /or registered of the new registered agent (if changed) and /or registered of the new registered agent (if changed) and /or registered of the new registered agent (if changed) and /or registered of the new registered agent (if changed) and /or registered of the new registered agent (if changed) and /or registered of the new registered agent (if changed) and /or registered of the new registered agent (if changed) and /or registered of the new registered agent (if changed) and /or registered of the new registered agent (if changed) and /or registered of the new registered agent (if changed) and /or registered of the new registered agent (if changed) and /or registered of the new registered agent (if changed) and /or registered agent (if changed) are registered agent (if changed) and /or registered agent (if changed) are registered agent (
	1395 NW 17TH AVE. STE. 109			
	(P.O. Box NOT acceptable) DELRAY BEACH FL 33445			
The street address changed will	ess of its registered office and the street address of the business office of its registered agent, I be identical.			
(\(\)	as authorized by resolution duly adopted by its board of directors or by an officer so he board, or the corporation has been notified in writing of the change. Carl Trapp, President (Printed or typed name and title)			
I hereby accept I further agree of my duties, ar document is be corporation ha	the appointment as registered agent and agree to act in this capacity. to comply with the provisions of all statutes relative to the proper and complete performance and I am familiar with and accept the obligation of my position as registered agent. Or, if this ing filed merely to reflect a change in the registered office address, I hereby confirm that the s been notified in writing of this change.			
<u> </u>	ignature of Registered Agesto (Date)			
If signing on be	ehalf of an entity:			
Carl Trann as Presid	ent of SKYS THE LIMIT INTERNATIONAL, INC			

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

(Typed or Printed Name)