

P000000088841

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

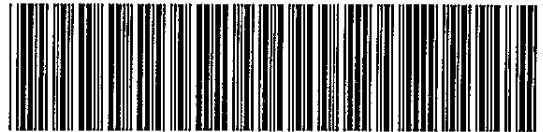
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

03 JAN 27 PM 1:44

FILED

Registered office change

T BROWN JAN 30 2003

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Double D Novelty, Inc.
(Name of corporation)

DOCUMENT NUMBER: P00000088841

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:

Shane Schanstra
(Name of person)

Turf Recovery Systems, Inc.
(Name of firm/company)

9317 Hunters Parkway
(Address)

Tampa, FL 33647
(City/state and zip code)

For further information concerning this matter, please call:

Julie Schanstra at (815) 654-9848
(Name of 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
409 E. Gaines Street
Tallahassee, FL 32399

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: Double D Novelty, Inc.
- 2. The principal office address: 8922 Magnolia Chase
Tampa, FL 33647
- 3. The mailing address (if different): 9317 Hunters Parkway
Tampa, FL 33647
- 4. Date of incorporation/qualification: 9/18/00 Document number: P00000088841

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

Shane Schanstra
28629 Dawns Break Point
Wesley Chapel, FL 33543

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

9317 Hunters Parkway
(P.O. Box or personal mailbox NOT acceptable)
Tampa, FL 33647

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.

Julie Schanstra
(Signature of an officer, chairman or vice chairman of the board)

Julie Schanstra, 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.

[Signature]
(Signature of Registered Agent)

1-13-03
(Date)

If signing on behalf of an entity:

Shane Schanstra
(Typed or Printed Name)

Registered Agent
(Capacity)

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