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LAW OFFICES

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December 12, 2000

Secretary of State
Division of Corporations
409 East Gaines Street
"The Old Jail"
Tallahassee, Florida 32301

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-12/18/00--01027--001
*****35.00 *****35.00

RE: Synektix, Inc.

Dear Sir or Madam:

Enclosed please find the "Statement of Change of Registered Office and Registered Agent" to be filed with your office as it pertains to the above-referenced corporation.

I have enclosed my check in the amount of \$35.00.

I would appreciate receiving confirmation from your office that the registered office and registered agent has been changed.

Thanking you in advance for your assistance on this matter.

Very truly yours,


MARC L. BARBAKOFF

MLB/ag
Enclosures
cc: Synektix, Inc.

FILED
00 DEC 18 PM 4:21
SECRETARY OF STATE
TALLAHASSEE, FLORIDA


ac rechg
12/26

**Statement of Change of Registered Office
and Registered Agent**


Pursuant to the provisions of Sections 607.034 and 607.037, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement for the purpose of changing its registered office and registered agent in the State of Florida.

1. The name of the corporation is **Synektix, Inc.**
2. The name and address of its present registered agent is:
Spiegel & Utrera, P.A.
343 Almeida Avenue
Coral Gables, Florida 33134.
3. The name and address to which its registered agent is to be changed
Marc L. Barbakoff, Esq.
2450 N.E. Miami Gardens Drive, Second Floor
Miami, Florida 33180
4. The address of its registered office and the address of the business office of its registered agent, as changed, will be identical.
5. Such change was authorized by resolution duly adopted by its board of directors.

Dated December 8th, 2000.


Signature (President or Vice President)
VIVIAN BERNSTEIN
Print Name

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.325 FLORIDA STATUTES.


Signature (Registered Agent) 12/11/00

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00 DEC 18 PM 4:21
SECRETARY OF STATE
TALLAHASSEE, FLORIDA