P00 000 104134

| (Requestor's Name) |
|---|
| (Address) |
| (Address) |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| (Document Number) |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
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COVER LETTER

| TO: Amendment Section Division of Corporations | | • | | | |
|---|-------------------------------|---|-----------------------|-------------|-------------------|
| SUBJECT: Lightseeker, Inc. Name of Corporation | | | _ | | |
| DOCUMENT NUMBER: P00000104134 | | | | | |
| The enclosed Statement of Change of Registered Offi | cc/Agent and fc | e are submitted for | – · filing. | | |
| Please return all correspondence concerning this matt | er to the followi | ng: | • | | |
| Roscann Minnet | | | | | |
| Name of Contact Person | | | | | |
| Lightseeker, Inc. | | | | | |
| Firm/Company | | | | | |
| 223 West Prospect Road | | | | | |
| Address | | | | | |
| Oakland Park, FL 33309 | | | | | |
| City/State and Zip Code 6: Call Like and Zip Code 6: Call Like and Zip Code | | | | | |
| E-mail address: (to be used for future annual repo | ort notification) |) | _ | | |
| For further information concerning this matter, please | call: | | , 7s | 2 | |
| Roscann Minnet | .954 |) ³⁵¹⁻⁷²⁸² ode & Daytime Tele | · ;-; | § ?? | |
| Name of Contact Person | at (<u>254</u> Area Co | ode & Daytime Tele | <u> ∵</u> enhoné } | <u>~~~</u> | ~ * 745 ! r |
| | | | -1/110116 1 | ا ا ا | *** |
| Enclosed is a \$35.00 check made payable to the Depa | rtment of State. | | | | |
| | | | | | |
| Pisas Sitte Mailing Address: | Street Addres | ç• | | ιO | '۔۔۔' |
| a rinan adan Amendment Section | Amendment S | | | 75 | |
| Division of Corporations | Division of C | | | | |
| P.O. Box 6327 | The Centre of | | | | |
| Tallahassee, FL 32314 | 2415 N. Mon Tallahassee, I | roe Street, Suite 8 FL 32303 | 310 | | |
| | | | | | |

CR2E045 (04/13)

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

| statement of cha | nge is submitte | ections 607.0502, 6. d for a corporation | organized i | ınder the | laws of the | State of Fl | lorida | this |
|--|--|---|--|--------------------------------------|--|--|----------------------------------|---|
| | | registered office or | registerea e | igent, or | ooin, in the | State of Fi | oriaa. | |
| 1. The name of t | he corporation: | Lightseeker, Inc. | | | | | | |
| 2. The principal | office address: | 223 West Prospect R | load | | | | | |
| | | Oakland | Park | FL | 3330 | 9 | | |
| | | rent): | | | | | | |
| 4. Date of incorporation/qualification: 11/6/2000 Document number: P0000010 | | | | | | P00000104 | 1134 | _ |
| | | of the current regist (If resigned, enter r | | and regis | tered office | on file wit | h the | |
| | Resigned | | | | | | | |
| | | _ | - | .=. | | | | |
| | | | | | | | | |
| | <u> </u> | | | | | | | |
| 6. The name, and (if changed): | l street address | of the new registere | ed agent (if | changed) | and /or reg | istered offi | ce | |
| | Charles L. Curt | is, P.A. | | | | | | |
| | | | | | <u> </u> | | | 202 |
| | 2000 S. Ocean | | P.O. Box NOT | | | | • : : | . · · · · · · · · · · · · · · · · · · · |
| | Lauderdale By | The Sea, FL 33062 | P.O. BOX NOT | acceptable | | | - | hợ I |
| | | | <u> </u> | | | | | Φ |
| The street addre | ess of its registe be identical. | ered office and the | street addre | ess of the | business o | ffice of its | register | rediagent. |
| Such change wa authorized by the | | y resolution duly a corporation has b | dopted by i | ts board I in writii seann Mi | | s or by an clange. | officer s | ت ب |
| - Lhereby accept | the annointme | nt as revistered au | ent and ass | ee to act | in this can | acity | | |
| l further agree (of my duties, an document is bei | to comply with d I am familiai ng filed merely | the provisions of a with and accept to to reflect a chang in writing of this c | ill statutes i he obligatio e in the rev | relative to on of my istered o | o the prope position as ffice addre. | r and comy registered ss, I hereby | olete per agent, v confiri | rformance Or, if this m that the |
| Lin | In L. Cin | the | | | 8/30 | lana | 7 | |
| Sig | nature of Registered | Agent | | | D/ | te | | |
| If signing on be such charge will authorize the transfer to th | half of an entit is authors is F LES L C yped or Printed Nam | urtis_ | | | | | | |

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