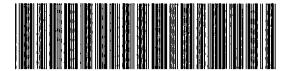
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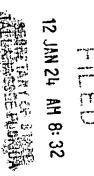
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RA Change

JAN 27 2012

T. LEWIS

COVER LETTER

Amendment Section Division of Corporations

TO:

SUBJECT:	GAZEEBOS UNLIMIT					
DOCUMENT NUMBER	OCUMENT NUMBER: P010000143					
The enclosed Statement of	f Change of Registered Office/Ag	gent and fee are su	bmitted for filing.			
Please return all correspondence concerning this matter to the following:						
	Thomas Fitzsi Name of Contac					
Firm/Company						
7000 S.W. Gator Trail Address						
Palm City, FL 34990 City/State and Zip Code						
E-mail address: (to be used for future annual report notification)						
For further information concerning this matter, please call:						
	Fitzsimmons a ontact Person	Area Code & D	828-5139 aytime Telephone Number			
	k made payable to the Departmen		ayume relephone rumou			
Ā D	Iailing Address: mendment Section ivision of Corporations O. Box 6327	Street Addr Amendmen Division of Clifton Bui	t Section Corporations			

2661 Executive Center Circle

Tallahassee, FL 32301

Tallahassee, FL 32314

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

statement of cha	provisions of sections 607.050. inge is submitted for a corpora er to change its registered office	tion organized	under the laws of the State	of_Florida		
1. The name of	the corporation: Gazeebos	<u>Unlimited</u>	Corp.			
2. The principal Palm City,	office address: 7000 S.W. FL 34990					
3. The mailing a	ddress (if different): Same					
4. Date of incorp	poration/qualification: 3/	3/2003	Document number:	P0100000143		
	I street address of the current returnent of State: (If resigned, en		and registered office on file	with the		
	Chris Ponsoldt					
	2740 S.W. Martin Downs Blvd., #240					
	Palm City, FL 34990			JN 24		
6. The name and (if changed):	I street address of the new regis	stered agent (if	changed) and /or registered	بالروا أيكس أتأثير		
	Thomas Fitzsimmons			32		
	7000 S.W. Gator Trail	P.O. Box NOT accep	wohle			
	Palm City, FL 34990	F.O. BOX NOT accep	naule			
The street addre	ess of its registered office and be identical.	the street addre	ess of the business office	of its registered agent,		
Such change was	as adthorized by resolution du ne opard, or the corporation ha	ly adopted by i	its board of directors or by I in writing of the change.	an officer so		
Signatur	Thomas J. Fitzsimmons Printed or typed name and title					
I hereby accept I further agree to of my duties, an document is bei corporation has	the appointment as registered to comply with the provisions d I am familiar with and acceng filed merely to reflect a child been notified in writing of the	l agent and agr of all statutes i pt the obligation ange in the reg is change.	ree to act in this capacity. relative to the proper and on of my position as regisi istered office address, I h	complete performance ered agent. Or, if this ereby confirm that the		
XVI	12-30-11					
	nature of Registered Agent half of an entity:		Date			
THOMS	T. Fitzs mmo	ns_				

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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