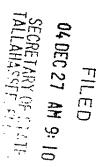
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COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: TOTAL Impact Services Inc (Name of corporation)
DOCUMENT NUMBER: P010000 32923
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:
Scott Heilpern (Name of contact person)
(Firm/Company)
16256 83RD Place Nonth
LOXA ha tchee FL 33470 (City/state and zip code)
For further information concerning this matter, please call:
Scott Heilpern at (561) 784-9122 (Name of contact 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

statement of change is submitted for a corporation organized under the laws of the State of
in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: lotal Impact Services Inc
2. The principal office address: 801 EasT main street Suite D
- Allen 4x 75002
3. The mailing address (if different):
4. Date of incorporation/qualification: 3/28/01 Document number: P01000032923
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
Scott Heilpern
11411 NW 32 manon
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Scott Heilan = == 0
16256 83 ND Place north 37 5
Loxahatchee, FL 33323
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.
(Signature of an other or director) Scott Heipen VP (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.
12/21/04
(Signature of Registered Agent) (Date)
f signing on behalf of an entity:
(Typed or Printed Name)

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