OFFICE LOCATION - 401 NORTHWEST SIXTH STREET, OKEECHOBEE, FLORIDA 34972

MAILING ADDRESS: POST OFFICE DRAWER 1367 OKEECHOBEE, FLORIDA 34973-1367

T.W. CONELY, JR. 1892-1969

TOM W. CONELY, III

DEBORAH M. HOOKER

October 23, 2001

TELEPHONE - (863) 763-3825

TELEPHONE - (863) 763-2767

FACSIMILE - (863) 763-6856

Florida Department of State Division of Corporations P. O. Box 6327 Tallahassee, Florida 32314

Re: Florida Braun, Inc.

900004653109--2 -10/25/01--01044--006 ******35.00 ******35.00

Dear Sir/Madam:

Enclosed please find Statement of Change of Registered Office and Registered Agent for the above corporation, together with check in the amount of \$35.00 to cover the filing fee.

Sincerely,

Tom W. Conely, III

TWC,III/bjl

Enc

RAIRO Change 10/29/01 SEGRETARY OF STATE AS DIVISION OF 25 FILE 2: 22

Florida Department of State, Jim Smith, Secretary of State

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. Fiorida Statutes, the undersigned corporation organized under the laws of the State of Florida submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida. 1a. The name of the corporation is: FLORIDA BRAUN, INC. 1b. Date of incorporation June 7, 2001 Document number P01000057917 2. The name and address of the current registered agent and office: Colin m. Cameron, 200 N.E. 4th Avenue, Okeechobee, Florida 34972 3. The name and address of the new registered agent and office: (P.O. Box Not Acceptable) Robert D. Thompson, 205 N.E. 2nd Street, Okeechobee, Florida 34972 The street address of its registered agent 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. Robert D. Braun, President SIGNATURE Typed or printed name and title October 20 2001 DATE HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, 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 COM-PLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATION OF MY POSITION AS REGISTERED AGENT. (Registered Agent) October

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

FILING FEE: \$35,00

CR2E045 (7-91)