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TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations		
SUBJECT: 1-CAn. 107, Onc (Name of corporation)		
DOCUMENT NUMBER: PD10000 65173		
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:		
TAMES R HORTMAN (Name of person)		
Name of firm/company)		
10 30x 2234 1 (Address)		
LAKI BULLA VISTA F1 32830 (City/state and zip code)		
For further information concerning this matter, please call:		
Tames Harman at (40) 832-7710 (Name of person) (Area code & daytime telephone number)		
Enclosed is a \$35.00 check made payable to the Department of State.		
Mailing Address:Street Address:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327409 E. Gaines StreetTallahassee, FL 32314Tallahassee, FL 32399		

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of ______ Flored a ______ in order to change its registered office or registered agent, or both, in the State of Florida. 1. The name of the corporation: 2. The principal office address: 32 X Z I 3. The mailing address (if different): 4. Date of incorporation/qualification: Document number: 5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): Orcanov, 51 32821 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 of the change. 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. ature of Registered Agent)

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

If signing on behalf of an entity:

(Typed or Printed Name)

(Capacity)