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| (Req | uestor's Name) | | | |
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RO Change 7/20/04

TRANSMITTAL LETTER

Amendment Section Division of Corporations

TO:

| SUBJECT: | Sweepsgame.com, Inc. | | | |
|---|---------------------------------------|---|--|--|
| | (Name of corporation) | | | |
| DOCUMENT NUMBER: | P01000081022 | · | | |
| The enclosed Statement of Change of | of Registered Office/Agent and fee | are submitted for filing. | | |
| Please return all correspondence con | ncerning this matter to the following | ; ; | | |
| | Michael Jenkins | | | |
| Man Transition I | (Name of person) | | | |
| PrecisionPlay Media | | | | |
| | (Name of firm/company) | | | |
| | 160 International Parkway, Suite | 250 | | |
| , , , , , , , , , , , , , , , , , , , | (Address) | *************************************** | | |
| | Heathrow, FL 32746 | | | |
| | (City/state and zip code) | - | | |
| For further information concerning t | this matter, please call: | | | |
| Jon Brown (Name of per | at (| 407) 805-9889 Area code & daytime telephone number) | | |
| (Ivaine of per | 5011) | Area code & daytime telephone number) | | |
| Enclosed is a \$35.00 check made pa | yable to the Department of State. | | | |
| Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 | 3 | 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

| _ | provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of | _ |
|---|--|-------------|
| • | itted for a corporation organized under the laws of the State of <u>Florida</u> in or gistered office or registered agent, or both, in the State of Florida. | aer |
| io change us regi | gistered byfice or registered agent, or bont, in the state of thoraca. | |
| 1. The name of the | the corporation: Sweepsgame.com, Inc. | |
| 2. The principal of | office address: 160 International Parkway, Suite 250 (New office address) | <u> </u> |
| | Heathrow, FL 32746 | |
| 3. The mailing ac | address (if different): Same | |
| 4. Date of incorp | poration/qualification: 8/16/2001 Document number: P01000081022 | <u> </u> |
| | d street address of the current registered agent and registered office on file with the rtment of State: | |
| | Michael Jenkins, Vice President | |
| | 174 East Baywood Square (Previous address) | |
| | Daytona Beach, FI 32119 | ~ |
| 6. The name and (if changed): | 174 East Baywood Square (Previous address) Daytona Beach, Fl 32119 d street address of the new registered agent (if changed) and /or registered office Michael Jenkins, Vice President 160 International Parkway, Suite 250 (New address) | |
| | Michael Jenkins, Vice President | ٠,, |
| | 160 International Parkway, Suite 250 (New address) | ું જે |
| , | (P.O. Box or personal mailbox NOT acceptable) | |
| | Heathrow, FL 32746 | |
| The street addre | ess of its registered office and the street address of the business office of its registered agent, as | |
| Such change wathe board, or the | as authorized by resolution duly adopted by its board of directors or by an officer so authorized the corporation has been notified in writing of the change. | by |
| IS | Michael Jenkins, Vice President (Printed or typed name and title) | |
| I hereby accept i I further agree to duties, and I am being filed mere | t the appointment as registered agent and agree to act in this capacity, to comply with the provisions of all statutes relative to the proper and complete performance of n familiar with and accept the obligation of my position as registered agent. Or, if this documently to reflect a change in the registered office address, I hereby confirm that the corporation has writing of this change. | my it is |
| | (Signature of Registered Agent) (Date) | |
| If signing on bel | ehalf of an entity: | |
| | (Tured or Printed Name) (Canacity) | |

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

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, Florida Statutes, | this statement of |
|---------------------------------------|---|--|
| change is submi | itted for a corporation organized under the laws of the State of Florida | in order |
| to change its reg | gistered office or registered agent, or both, in the State of Florida. | |
| 1. The name of | the corporation: Sweepsgame.com, Inc. | |
| 2. The principal | office address: 160 International Parkway, Suite 250 (New office address) | |
| | Heathrow, FL 32746 | |
| 3. The mailing a | address (if different): Same | |
| 4. Date of incor | poration/qualification: 8/16/2001 Document number: P01000081022 | |
| | d street address of the current registered agent and registered office on file with the rtment of State: | |
| | William Mark Procheska, President | - |
| | 298 P Canterbury Road | 32 |
| | Baltimore, MD 21014 | 湯るく |
| 6. The name and (if changed): | d street address of the new registered agent (if changed) and /or registered office | OF ENCYPTION |
| | William Mark Procheska, President | |
| | 21 Faliston View Court (New address) | |
| | (P.O. Box or personal mailbox NOT acceptable) | |
| | Fallston, MD 21047 | _ |
| The street address changed will be | ess of its registered office and the street address of the business office of its registered identical. | ered agent, as |
| Such change withe board, or the | as authorized by resolution duly adopted by its board of directors or by an officer exproporation has been notified in writing of the change. | so authorized by |
| · · · · · · · · · · · · · · · · · · · | Michael Jenkins, Vice Presiden (Printed or typed name and to | |
| | t the appointment as registered agent and agree to act in this capacity, to comply with the provisions of all statutes relative to the proper and complete pen familiar with and accept the obligation of my position as registered agent. Or, it is to reflect a change in the registered office address, I hereby confirm that the continuity of this change. | erformance of my f this document is orporation has |
| \longrightarrow | (Signature of Registered Agent) 2-13-(Date) | 14 |
| If signing on be | ehalf of an entity: | |
| | (Typed or Printed Name) (Canacity) | |

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