

Filing of Documents

We enclose the following documents for filing with your office:

April 22, 2002

Statement of Change of Registered Office and Registered Agent & \$35.00

PO1000105610

Please contact us if you have any questions.

To:

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

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Law Offices

Richard M. Georges, P.A.

P.O. Box 14545

St. Petersburg, FL 33733

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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Charter No. P01000105610

Date Filed Nov. 1. 2001

**STATEMENT OF CHANGE OF REGISTERED OFFICE
AND REGISTERED AGENT**

Pursuant to the provisions of Sections 607.0501 and 607.0502, or 607.1508, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement for the purpose of changing its registered office and registered agent in the State of Florida.

1. The name of the corporation is: SIOUX CITY BRANDON, INC.

2. The name and address of its present registered agent is:

Richard M. Georges
3656 First Ave. N.
St. Petersburg, FL 33713

3. The name and street address to which its registered agent is to be changed is:
(P.O. BOX NOT ACCEPTABLE)

William Loiacano

8402 Lemon Rd., Suite B

Port Richey, FL 34668

4. The street address of its registered office and the street address of the business office of its registered agent, as changed, are identical.

5. Such change was authorized by resolution duly adopted by its board of directors or by an officer of the corporation so authorized by the board of directors.

William Loiacano, President
(Typed or printed name and title)

Signature *William Loiacano*
(President or Vice President)

Date 4-18-02

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 COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATION OF MY POSITION AS REGISTERED AGENT UNDER SECTION 607.0505, FLORIDA STATUTES.

Please Print/Type Name William Loiacano

Signature *William Loiacano*
(Agent)

Date 4-18-02

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