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COVER LETTER

Division of Corporations
SUBJECT: Sovereign INTERNATIONAL ASSET MANAGEMENT, INC. (Name of Corporation)
DOCUMENT NUMBER: \$ 01 000 11 5 2 31
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:
VIVIAN GROSSMAN (Name of Contact Person)
SOVEREIGN ENTERNATIONAL (Firm/Company)
1312 ALT 19 (Address)
PALM HANDA FL 34683 (City/State and Zip Code)
For further information concerning this matter, please call:
VLV(AW GROSSHAW at (717) 784 4841 (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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

TO:

Amendment Section

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 submitted for a corporation organized under the laws of the State of Florida. in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: SOVEREIGN TNTERNATIONAL ASSET MANAGEMENT, TM
2. The principal office address: [312 ALT 19
PALH HARbOR, FL 34683
3. The mailing address (if different):
4. Date of incorporation/qualification: DECEMBER 5, 2001 Document number: PO 1000 11 5 2 31
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
CORPORATION SERVICE COMPANY
1201 HAYS STREET = 3
TALLAHASSEE, FL 32301-5825 7
6. The name and street address of the new registered agent (if changed) and /or registered of the life (if changed):
LARRY U. GROSSMAN SEE S
(P.O. Box NOT acceptable)
PALM HARbOR FL 34683
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.
LARRY C. GROSSHAW MAWAGING DIRECTOR
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.
(Signature of Registered Agent) April 19 2007 (Date)
If signing on behalf of an entity:
(Typed or Printed Name)

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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