P0200005734

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COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: LML ENTERPRISES INC. (Name of corporation) DOCUMENT NUMBER: P0200005734

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:

Mere, Moy (Name of contac

P.O. 5

Sarasota ity/state and zip code)

(Firm/Company)

For further information concerning this matter, please call:

at $(\underline{941})$ 232-9: (Area code & daytime telephone 1erri <u>Movian</u> e of contact person)

Enclosed is a \$35.00 check made payable to the Department of State.

<u>Mailing Address:</u> Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address: Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399

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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.

1. The name of the corporation: LML ENTERPRISES INC	_ <u></u>
2. The principal office address: P.O. BOX 51001 SAPAS	OTA
FLORIDA 34232	
3. The mailing address (if different): SAME	·
4. Date of incorporation/qualification: Document number: POZ DOO	005734
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:	
RAYLAKE	. .
154 Grand Oak Circle	· · ·
Venice, PL 34292	04 D
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):	FILE DEC -9 JRETARY AHASSEE
Merei Moylan	AMIC E. FL
3931 Serenity Circle	I 10: 43 STATE
Sarasota PL 34235	

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 charge 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.

(Printed or typed name and title)

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 Ag

If signing on behalf of an entity:

RIC. MOY

(Date)

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

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