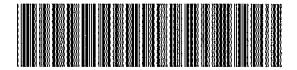
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TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations		
SUBJECT: DUN-WIN INC. (Name of corporation)		
DOCUMENT NUMBER: PO 2000043471		
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:		
Jeffery E. Duncan (Name of person)		
Dun-Win Inc.		
(Name of firm/company)		
Le752 Leisure (Address)		
Navarre FL 32564		
(City/state and zip code)		
For further information concerning this matter, please call:		
1944 Duwan at (850) 936-1081 (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 CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617	
change is submitted for a corporation organized under the laws of the State	
to change its registered office or registered agent, or both, in the State of Flo	
1. The name of the corporation: Dun-Win In	<u>(, </u>
2. The principal office address: LeTS2 LeiSur	
Navarre FL 325	Tole
3. The mailing address (if different):	
4. Date of incorporation/qualification: 4(22/02 Document nu	mber: P02000043471
5. The name and street address of the current registered agent and registered Florida Department of State:	office on file with the
& Seffery B. Du	ncan
2 Seffery B. Du 225 Condoba	St. Page
Gulf Breeze	
6. The name and street address of the new registered agent (if changed) and (if changed):	/or registered office
6752 Leisure	FLOR
Navarre FL 325	ble
(P.O. Box or personal mailbox NOT acceptable)	
The street address of its registered office and the street address of the bus changed will be identical.	
Such change was authorized by resolution duly adopted by its board of d the board, or the corporation has been notified in writing of the change.	irectors or by an officer so authorized by
Secondarium of an officer of director)	(Printed or typed name and title)
I hereby accept the appointment as registered agent and agree to act in the I further agree to comply with the provisions of all statutes relative to the duties, and I am familiar with and accept the obligation of my position a being filed merely to reflect a change in the registered office address, I have notified in writing of this change.	his capacity, e proper and complete performance of my s registered agent. Or if this document is
4	
(Signature of Registered Agent)	(Date)
If signing on behalf of an entity:	
(Typed or Printed Name)	(Capacity)

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