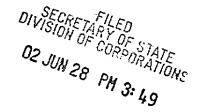
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Law Office Law Office Mark L. Gaeta, P.A 1000 SOUTH FEDERAL HIGHWAY SUITE 103	0000061125100 -07/01/02-01015-010 *****35.80 ******35.80
Ft. Lauderdale, Florida 33316-1110	
	Office Use Only
CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):	
1. (Corporation Name)	(Document #)
2(Corporation Name)	(Document #)
3(Corporation Name)	(Document #)
4. (Corporation Name)	(Document#)
	Certified Copy
Walk in Pick up time Mail out Will wait Pho	tocopy
Profit Not for Profit Limited Liability Domestication Other	mendment esignation of R.A., Officer/Director hange of Registered Agent issolution/Withdrawal lerger
OTHER FILINGS REGI	STRATION/QUALIFICATION
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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.

The name of the corporation is:

Kinder Grateful, Inc.

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

Filings, Inc. 3732 N.W. 16th Street Fort Lauderdale, Florida 33311

3. The name and address to which its registered agent is to be changed is:

David Kinder 3461 N.W. 44th Street, Apt. 104 Ft. Lauderdale, FL 33309

- 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.

David Kinder, President/Director

Date: 6/26/02

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: David Kinder
Signature 6/26/62

Division of Corporations, FILING FEE \$35, P.O. Box 6327, Tallahassee, FL 32314

c:Gaeta\corporat\changeag-KD.wpd