

P02000083320

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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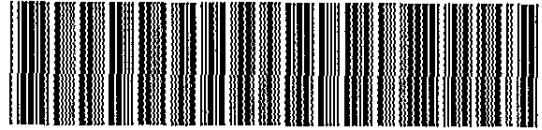
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

9/1  
2003

## TRANSMITTAL LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: DL Technologies Inc.  
(Name of corporation)

DOCUMENT NUMBER: \_\_\_\_\_

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:

Daniel Ly  
(Name of person)

DL Technologies Inc.  
(Name of firm/company)

119 S. Goltview Rd. Ste 6  
(Address)

Lake Worth, FL 33460  
(City/state and zip code)

For further information concerning this matter, please call:

Dan Ly at (561) 662-1825  
(Name of person) (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  
409 E. Gaines Street  
Tallahassee, FL 32399



FLORIDA DEPARTMENT OF STATE  
Glenda E. Hood  
Secretary of State

August 26, 2003

DANIEL LY  
% DL TECHNOLOGIES, INC.  
119 S. GOLFVIEW RD., STE 6  
LAKE WORTH, FL 33460

SUBJECT: DL TECHNOLOGIES INC.  
Ref. Number: P02000083320

We have received your document for DL TECHNOLOGIES INC. and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

The name and title of the person signing the document must be noted beneath or opposite the signature.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6908.

Anna Chesnut  
Document Specialist

Letter Number: 503A00048112

**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: DL Technologies Inc.
2. The principal office address: 119 S. Golfview Rd Ste. 6  
Lake Worth, FL 33460
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 8/1/2002 Document number: P020000 F3320
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  
Tallahassee, FL 32301
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):  
Daniel Ly - Chairman + CEO  
119 S. Golfview Rd Ste 6  
(P.O. Box or personal mailbox NOT acceptable)  
Lake Worth, FL 33460

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.

(Signature of an officer, chairman or vice chairman of the board)

Daniel Ly - Chairman  
(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 Agent)

8-19-03  
(Date)

If signing on behalf of an entity:

Daniel Ly  
(Type or Printed Name)

8-19-03  
(Capacity)

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

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