P02000105638

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SECRETARY OF STATE

R.A. Change

4-11-08

COVER LETTER

TO:	Amendment Section Division of Corporations	
SUBJ	ECT: LAFAYA, INC. (Name of Co	ornoration)
	(rimine of o	
DOC	IMENT NUMBER: P02000105638	
The er	iclosed Statement of Change of Registered Office	Agent and fee are submitted for filing.
Please	return all correspondence concerning this matter	to the following:
	ROBERT HAIGHT	
	(Name of Cor	tact Person)
	LAFAYA,INC.	
	(Firm/Co	mpany)
	5811 BELTLINE ROAD	
	(Addr	ess)
	DALLAS, TEXAS 75254	
	(City/State and	Zip Code)
or fur	ther information concerning this matter, please ca	all:
	RT HAIGHT	
NOBL	(Name of Contact Person)	at (972) 980-4676 (Area Code & Daytime Telephone Number)
	·	
Enclose	ed is a \$35.00 check made payable to the Department	nent of State.
	Mailing Address: Amendment Section	Street Address: Amendment Section
	Division of Corporations	Division of Corporations
	P.O. Box 6327	Clifton Building
	Tallahassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301
		LANGHAMAS, 1:4, 37, 3171

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: LAFAYA, INC.
2. The principal office address: 5811 BELTLINE ROAD; DALLAS, TEXAS 75254
3. The mailing address (if different): SAME
4. Date of incorporation/qualification: 10/01/2002 Document number: p02000105638
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
HARVEY SCHOLL
5295 TOWN CENTER ROAD, THIRD FLOOR
BACA RATON,FL 33486 6. The name and street address of the new registered agent (if changed) and /or registered office
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
ROBERT HAIGHT 17597 ROCKEFFLLER CIRCLE SUITE 4
77007 11007111 1100711 1100711 1100711 1100711 11007111 1100711 1100711 1100711 1100711 1100711 1100711 1100711 11007111 1100711 1100
(P.O. Box NOT acceptable) FT. MYERS, FLORIDA 33967
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 cogporation has been notified in writing of the change.
(Signature of an opticer or director) ROBERT HAIGHT—DIRECTOR (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.
Kelet (Signature of Registred Agent) 7 April 2008 (Date)
If signing on behalf of an entity:
(Typed or Printed Name)

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