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COVER LETTER

| TO: Amendment Section Division of Corporations |
|---|
| SUBJECT: HUNAN ON THE BEACH, INC. |
| (Name of corporation) |
| DOCUMENT NUMBER: P02000107551 |
| 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: |
| II TOO AND TITMEN ID |
| H. FRANK WINN, JR. (Name of contact person) |
| (Name of contact posson) |
| ATTORNEY AT LAW |
| (Firm/Company) |
| 322 S. ALCANIZ STREET |
| (Address) |
| PENSACOLA, FL 32501 |
| (City/state and zip code) |
| For further information concerning this matter, please call: |
| H. FRANK WINN, JR. at (850) 434-6214 (Name of contact person) (Area code & daytime telephone number) |
| (Name of contact 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 Street Address: Amendment Section Division of Corporations |

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

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 |
|--|
| in order to change its registered office or registered agent, or both, in the State of Florida. |
| 1. The name of the corporation: HUNAN ON THE BEACH, INC. |
| 2. The principal office address: 38 CLAYTON LANE #19 SANTA ROSA BEACH, FLORIDA 32549 |
| 3. The mailing address (if different): P.O. BOX 5794 |
| NAVARRE, FLORIDA 32566 |
| 4. Date of incorporation/qualification: Oct. 3, 2002 Document number: P02000107551 |
| 5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: |
| THEODORE R. QUARLES |
| 508 FALLIN WATERS DRIVE |
| MARY ESTHER, FLORIDA 32569 |
| MARY ESTHER, FLORIDA 32569 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): ANCHANA VONGSUNORAMATE 38 CLAYTON LANE #19 (P.O. Box NOT acceptable) |
| ANCHANA VONGSUNORAMATE |
| 38 CLAYTON LANE #19 |
| (P.O. Box NOT acceptable) |
| SANTA ROSA BEACH, FLORIDA 32549 |
| 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. |
| ANCHANA VONGSUNORAMATE, PRESIDENT (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 mixely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change. |
| SEPTEMBER 7, 2004 |
| (Signature of Registered Agent) (Date) If signing on behalf of an entity: |
| |
| (Typed or Printed Name) |

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