P03000044943

| (Requestor's Name) |
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| PICK-UP WAIT MAIL |
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| (Business Entity Name) |
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COVER LETTER

| ro: | Amendment Section Division of Corporations | |
|--------|---|---|
| CHE | ECT: PEBBLEWOOD DRIVE, INC. | |
| эорэ | (Name of | corporation) |
| DOC | JMENT NUMBER: P03000044943 | |
| The en | nclosed Statement of Change of Registered Offi | ice/Agent and fee are submitted for filing. |
| Please | return all correspondence concerning this matter | er to the following: |
| | | HOMAS, CPA |
| | (Name of co | ontact person) |
| | | & THOMAS, LLC Company) |
| | | M PL., STE 801 Idress) |
| | | EACH, FL 33401-8106 |
| | ` • | and zip code) |
| For fu | rther information concerning this matter, please | call: |
| | AVID J THOMAS, CPA | at (561) 689-6000 (Area code & daytime telephone number) |
| | (Name of contact person) | (Area code & daytime telephone number) |
| Enclos | sed is a \$35.00 check made payable to the Depa | artment 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 |

CR2E045(6/04)

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: PEBBLEWOOD DRIVE, INC. | | | |
| 2. The principal office address: C/O HOLYFIELD & THOMAS, LLC 1601 FORUM PL. STE 801 | | | |
| WEST PALM BEACH, FL 33401-8106 | | | |
| 3. The mailing address (if different): SAME | | | |
| 4. Date of incorporation/qualification: 04/22/2003 Document number: P03000044943 | | | |
| 5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: | | | |
| RONALD WITOWSKI, ESQ. | | | |
| 12230 FOREST HILL BLVD, STE 220 | | | |
| WELLINGTON, FL 33414 | | | |
| 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): | | | |
| DAVID J THOMAS, CPA | | | |
| 1601 FORUM PL., STE 801 | | | |
| (P.O. Box NOT acceptable) | | | |
| WEST PALM BEACH, FL 33401-8106 | | | |
| 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. | | | |
| Sonja Reichle, President (Signature of an other or 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. | | | |
| Signature of Resistered Agent) (Date) | | | |
| If signing on behalf of an entity: | | | |

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