

P03000081992

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

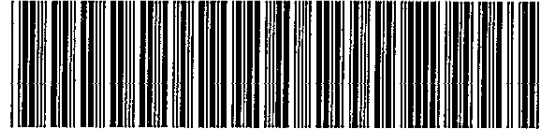
(Business Entity Name)

(Document Number)

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dg.  
12/2/03

## TRANSMITTAL LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: Express GPS, Inc.  
(Name of corporation)

DOCUMENT NUMBER: P030000081997

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:

Joanne Caputo  
(Name of person)

Express GPS, Inc.  
(Name of firm/company)

1070 N Wickham Rd #107  
(Address)

Melbourne FL 32935  
(City/state and zip code)

For further information concerning this matter, please call:

Joanne Caputo  
(Name of person)

at ( 321 ) 984-9836  
(Area code & day time 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

November 18, 2003

Amendment Section  
Division of Corporations  
PO Box 6327  
Tallahassee, FL 32314

To Whom It May Concern:

I am 100% owner of Express GPS, and would like to make additional changes to the Articles of Corporation. Currently the information for Document number P03000081992 is as follows:

Principal office Address: 1070 N Wickham Rd #108  
Melbourne, FL 32935

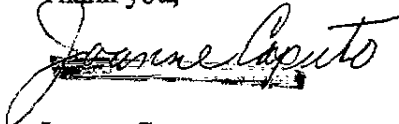
Mailing Address: 212 Brightwater Dr  
Palm Bay, FL 32909

It needs to read:

Principal Office Address: 1070 N Wickham Rd #107  
Melbourne, FL 32935

Mailing Address: 1070 N Wickham Rd #107  
Melbourne, FL 32935

Thank you,

A handwritten signature in cursive script, appearing to read "Joanne Caputo". The signature is written in dark ink and is positioned above the printed name and title.

Joanne Caputo  
100% Owner/President - Express GPS, Inc

**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: EXPRESS G.P.S., INC.  
2. The principal office address: 1070 N WICKHAM Rd #108  
McLEOD, FL 32935  
3. The mailing address (if different): 212 BRIGHTWATER DR.  
PAIM BAY, FL 32907  
4. Date of incorporation/qualification: 7/25/03 Document number: P03000081972  
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

BARBARA PEREZ  
1070 N WICKHAM Rd #108  
McLEOD, FL 32935

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

CARY B. SACK, ESQ.  
1900 Palm Bay Rd. NE  
STE. G

(P.O. Box or personal mailbox NOT acceptable)

Palm Bay, FL 32909

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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.

Joanne I. Caputo  
(Signature of an officer or director)

JOANNE I. CAPUTO OWNER-PRES.  
(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.

Cary B. Sack  
(Signature of Registered Agent)

Nov. 20, 2003  
(Date)

If signing on behalf of an entity:

\_\_\_\_\_  
(Typed or Printed Name)

\_\_\_\_\_  
(Capacity)

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

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