## PO40000 48994

| Carlos Riqueron<br>Donte Footucary<br>Donte Footucary<br>321 N. University DRIVE<br>Plantation Cw 33944 |
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| (Business Entity Name)  |
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On 12,30,05

## TATEMENT 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 in order to change its registered office or registered agent, or both, in the State of Florida.   |   |
|--|---|
| 1. The name of the corporation: DANTE Footwear iNC.  |   |
| 2. The principal office address: 321 N. UNIVERSITY Dr. Suite 3-0  Plantation FW 33324  |   |
| 3. The mailing address (if different):   |   |
| 4. Date of incorporation/qualification: 1/2004 Document number: P040000 48 99  | 4 |
| 5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:   | 7 |
| Pladation Flo 33374  |   |
| 6. The name and street address of the new registered agent (if changed) and /or registered office of the changed):  Carlos Alberto Figuration  640 5 w. 133 Are  (P.O. Box NOT acceptable)  DAVIE TO 333328  |   |
| 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.    Compared or an officer or director   Compared 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) (Date)  If signing on behalf of an entity:   |   |
| (Typed or Printed Name)  |   |

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