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COVER LETTER

Division of Corporations
SUBJECT: Third Rail Productions Inc. (Name of Corporation)
DOCUMENT NUMBER: <u>PO 40000 67047</u>
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:
Name of Contact Person)
Third Rail Productions Inc.
1329 Homewood Dr. (Address)
Belle Isle FL 32809 (City/State and Zip Code)
For further information concerning this matter, please call:
James Turner at (407) 970-2513 (Area Code & Daytime Telephone Number)
England is a \$25.00 cheek made payable to the Department of State

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Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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
in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: Third Rail froductions Inc.
2. The principal office address: 3104 S. Par K. Ave.
Sanford, FL 32773
3. The mailing address (if different):
4. Date of incorporation/qualification: 4/23/04 Document number: P0400067047
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
James Turner-pres/Third Rail froductions Inc.
3104. S. Park Are Es S
S. F. J. 32.203 P. S. T.
January 29
6. The name and street address of the new registered agent (if changed) and /or registered office
700
mes wener
(P.O. Box NOT acceptable)
Relle Tele F1 32809
The etrest address of its arrivated office and the standard of
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.
(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.
11 10 -1
(Signature of Registered Agent)
If signing on behalf of an entity:
(Typed or Primed Name)

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

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