## P04000103202

| (Re                     | questor's Name)   |             |
|-------------------------|-------------------|-------------|
| (Ad                     | dress)            |             |
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| (Cit                    | y/State/Zip/Phone | = #)        |
| PICK-UP                 | ☐ WAIT            | MAIL        |
| (Bu                     | siness Entity Nar | ne)         |
| (Do                     | cument Number)    |             |
| Certified Copies        | _ Certificates    | s of Status |
| Special Instructions to | Filing Officer:   |             |
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SECRETARY OF STATE

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## COVER LETTER

| TO:   | Amendment Section Division of Corporations   |  |
|---|--|--|
| CUDIC   | ECT: Ocean Jewel Casino & Entertainment, Inc.  |  |
| SODJE   | (Name of corporation)  |  |
| DOCU  | UMENT NUMBER: P04000103202   |  |
|   | closed Statement of Change of Registered Office/Agent and fee are submitted for filing.  |  |
| Please  | return all correspondence concerning this matter to the following:   |  |
|   |  |  |
|   | Michael Hlavsa   |  |
|   | (Name of contact person)   |  |
|   |  |  |
| Ocean Jewel Casino & Entertainment, Inc. (Firm/Company) |  |  |
|   |  |  |
|   | 100 First Avenue South, Box 2006   |  |
|   | (Address)  |  |
|   |  |  |
|   | St. Petersburg, FL. 33701 (City/state and zip code)  |  |
| F 6   |  |  |
| For rur   | ther information concerning this matter, please call:  |  |
| Michae  | Hlavsa at (727 ) 287-1600 (Name of contact person) (Area code & daytime telephone number)  |  |
|   | (Name of contact person) (Area code & daytime telephone number)  |  |
| Enclose   | ed 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 |  |

CR2E045(6/04)

V-9526 1500-9310200 Licenses-F6A

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

| statement of cha  | provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this ange is submitted for a corporation organized under the laws of the State of Florida er to change its registered affice or registered agent, or both, in the State of Florida.  |
|---|--|
|   | the corporation: Ocean Jewel Casino & Entertainment, Inc.  |
| 2. The principal  | office address: 100 First Avenue South, 2nd Floor, St. Petersburg, FL 33701  |
|   |  |
| 3. The mailing a  | address (if different):  |
| 4. Date of incor  | poration/qualification: July 12, 2004 Document number: Po4000103202  |
|   | d street address of the current registered agent and registered office on file with the rtment of State:   |
|   | Robert H. Schenk   |
|   | 100 First Avenue South, 2nd Floor  |
|   | St. Petersburg, FL 33701   |
| 6. The name and (if changed):   | d street address of the new registered agent (if changed) and /or registered office  |
|   | Bradley Bole, Attorney at Law  |
|   | 535 Central Avenue   |
|   | (P.O. Box NOT scoeptable)  |
|   | St. Petersburg, FL 33701   |
|   | ess of its registered office and the street address of the business office of its registered agent, be identical.  |
| Such change X   | is authorized by resolution duly adopted by its board of directors or by an officer so ecoporation has been notified in writing of the change.   |
| Market  | Michael Hlavsa, Acting CEO (Printed or typed name and title)   |
| I hereby accept<br>I further agree to<br>of my duties, an<br>document is bei<br>corporation has | the appointment as registered agent and agree to act in this capacity.  to comply with the provisions of all statutes relative to the proper and complete performance of I am familiar with and accept the obligation of my position as registered agent. Or, if this not filled merely to reflect a change in the registered office address, I hereby confirm that the specified in writing of this change.  (Date) |
| $\mathcal{B}_{\sigma}$  | YPOLEY M BOLE  yped or Printed Name)   |

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