## 

(Requestor's Name)		
(Address)		
(Address)		
(Cit	y/State/Zip/Phone	· #)
PICK-UP	WAIT	MAIL
(Business Entity Name)		
(Document Number)		
Certifled Copies	_ Certificates	of Status
Special Instructions to Filing Officer:		

Office Use Only



300043636129 PLINE 24 m

12/29/04--01015--016 \*\*35.00

## Florida Department of State

## 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, the undersigned corporation organized under the laws of the State of Florida submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida. 1a. The name of the corporation is:-1b. Date of incorporation \( \text{Ologioth} Document number P04000128093 2. The name and address of the current registered agent and office: Erik C. Larsen 243 W. Park Avenue, Suite 201 Winter Park, FL 32789 3. The name and address of the new registered agent and office: (P.O. Box Not Acceptable) CLIVE INGLETON 703 Canaraque Place, #201, Lake Mary, FL 32746 The street address of its registered agent 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. CLIVE INGLETON, Pres. Typed or printed name and title

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, 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.

SIGNATURE (Registered Agent)

DATE 12 - 21 - 04

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

CR2E045 (7-91) FILING FEE: \$35.00