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| Special Instructions to Fil | ling Officer: | ŀ | | |
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SECRETARY OF STATE
AND ASSEE FLORIDA

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COVER LETTER

| TO: | Amendment Section Division of Corporations | | | | |
|---|---|--|--|--|--|
| SUBJI | ECT: Gold Leaf Security of Florid (Name of Corporation | a, Inc. | | | |
| DOCUMENT NUMBER: P04000141955 | | | | | |
| 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 | lowing: | | | |
| | Irving Schwab (Name of Contact Person | | | | |
| | (Name of Contact Pers | on) | | | |
| Gold Leaf Security | | | | | |
| | (Firm/Company) | | | | |
| 2240 Woolbright Road, Suite 349 (Address) | | | | | |
| Boynton Beach, FL 33426 (City/State and Zip Code) | | | | | |
| For fu | rther information concerning this matter, please call: | | | | |
| | Irving Schwab at (Some of Contact Person) (A | 61) 572-0202 rea Code & Daytime Telephone Number) | | | |
| Enclos | sed is a \$35.00 check made payable to the Department of S | state. | | | |
| | 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

| statement of cha | e provisions of sections 607.0502, 617.0502, 607 nange is submitted for a corporation organized u ler to change its registered office or registered a | under the laws of the State of | Florida |
|--|--|---|--|
| | f the corporation: Gold Leaf Securi | | |
| 2. The principal | al office address: 2753 John Young | Parkway | |
| | Kissimmee, FL 34 | 741 | |
| 3. The mailing a | address (if different): | | |
| 4. Date of incorp | rporation/qualification: 10/14/2004 | Document number: P040 | 00141955 |
| | nd street address of the current registered agent a artment of State: | and registered office on file w | ith the |
| | | | _ |
| | 2753 John Young Parkway | | |
| | 4 | | _ |
| | Kissimmee, FL 34741 | | TAS OF |
| The name and (if changed): | nd street address of the new registered agent (if c | hanged) and /or registered of | Fig. 1 |
| (ii changeu). | | | 355 |
| | - | | - SENGE D |
| | 2240 Woolbright Road, Sui (P.O. Box NOT acceptable) | te 349 | + FLO |
| | Boynton Beach, FL 33426 | | 25 25 |
| The standard and a discrete | | | |
| - | ress of its registered office and the street addre ll be identical. | | |
| Such change wa authorized by th | vas authorized by resolution duly adopted by it the board, or the corporation has been notified | ts board of directors or by an in writing of the change. | n officer so |
| | | | |
| (Signatu | ture of an officer or director) | President & CEO (Printed or typed name and | |
| I hereby accept I further agree t of my duties, an document is bei corporation has | t the appointment as registered agent and agre to comply with the provisions of all statutes re nd I am familiar with and accept the obligatio ring filed merely to reflect a change in the regi as been notified in writing of this change. | ee to act in this capacity. elative to the proper and co n of my position as register istered office address, I here | mplete performance ed agent. Or, if this by confirm that the |
| | | June 26, 2006 | |
| _ | ignature of Registered Agent) | (Date) | |
| ii signing on be | ehalf of an entity: | | |
| Irving_ | Schwab (Typed or Printed Name) | | |
| (. | * * * FILING FEE: \$3 | 35.00 * * * | |

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (8/05)