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COVER LETTER

Division of Corporations
SUBJECT: Composition Agriculture (Name of Corporation)
DOCUMENT NUMBER: PO 4000 155 851
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:
Mary Ann G. Vacum (Name of Contact Person)
(Firm Company)
905 Oak Wood Cove
Altanonte Springs FL 32714 (City/State and 2ip Code)
For further information concerning this matter, please call: May Ann G. Yocum at (321) 377-5606
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed 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 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 ofin order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: CDM Asency Inc. 2. The principal office address: 905 Oak Wood Cove Altamonte Springs, FL 32714
3. The mailing address (if different):
4. Date of incorporation/qualification: 11 16 04 Document number: 004000 155851
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: Li Chard House States Or lando, FL 32806 8
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): Ann G. Accumulation Ann G. Ann G.
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. (Signature of an officer of director) (Signature of an officer of director) (Signature of an officer of director)
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) (Signature of Registered Agent)
If signing on behalf of an entity:

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

(Typed or Printed Name)