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REGISTERED AGENT CHANGE

CENTRAL CONSULTING, INC.

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July 25, 2006

FLORIDA DEPARTMENT OF STATE
Division of Corporations

CENTRAL CONSULTING, INC. 424 E CENTRAL BLVD SUITE 232 ORLANDO, FL 32801

SUBJECT: CENTRAL CONSULTING, INC.

REF: P05000044152

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

PLEASE COMPLETE THE ADDRESS FOR THE NEW REGISTERED AGENT UNDER SECTION #6 OF THE DOCUMENT.

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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 Florida in order to change its registered office or registered agent, or both, in the State of Florida 1. The name of the corporation: Central Consulting, Inc. 2. The principal office address: 424 E Central Blvd., Suite 232, Orlando, FL 32801 3. The mailing address (if different): Document number: P05000044152 4. Date of incorporation/qualification: 03/23/2005 5. The name and street address of the current registered agent and registered office on file with the Plorida Department of State: Alex H. Hamrick 1000 Legion Place, Suite 1700 Orlando, FL 32801 6. The name and street address of the new registered agent (15 changed) and for registered office (if changed): William R. Lowman, Jr. 1000 Legion Place, Suite 1700 (P.O. Box NOT acceptable) 32801 Orlando, FL

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, at the corporation has been notified in writing of the change.

t as registered agent and agree to act in this capacity, we provisions of all statutes relative to the proper and complete performance with and accept the obligation of my position as registered agent. Or, if this or refect a change in the registered affice address. I hereby confirm that the writing of this change. If signing on behalf of an entity:

* * * FILING FEE: \$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)

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