Division of Corporations

Florida Department of State

Division of Corporations Public Access System

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Division of Corporations

Fax Number

: (850)205-0380

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.

Account Number : 110432003053 Phone : (305)672-0686 Fax Number : (305)672-9110

REGISTERED AGENT CHANGE

DARDEN CONCEPTS, INC.

Certificate of Status	0
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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.
The name of the corporation: Darden Concepts, Inc.
2. The principal office address: 5900 Lake Ellenor Drive, Orlando, FL 32809
3. The mailing address (if different): 5900 Lake Ellenor Drive, Orlando, FL 32809
4. Date of incorporation/qualification: 5/25/05 Document number: P05000076424
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State;
Corporation Service Company
1201 Hays Street
Tallahassee, FL 32301
5. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Corporate Creations Network Inc. 11380 Prosperity Farms Road, Suite 221E (P.O. Bax NOT acceptable)
11380 Prosperity Farms Road, Suite 221E
Palm Beach Gardens, FL 33410
The street address of its registered office and the street address of the business office of its registered egent.
Such change was authorized by resolution duly adopted by its board of directors or by an officer so without of the change.
(Marker & Way 2 Douglas & Wantz Secretary) (Printed or typed participation of the difference and state)
hereby accept the appointment as registered agent and agree to act in this capacity, further agree to comply with the provisions of all statutes relative to the proper and complete performance if my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this locument 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.
DETOUSO 3/27/06
(Signature of Registered Agent) (Date)
f signing on behalf of an entity:
D. Stoutt Assistant Scurctary. (Typod or Printed Name)

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

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