

P05000097276

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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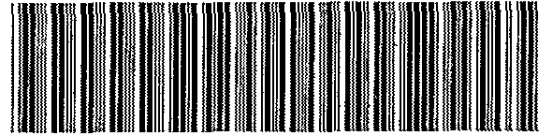
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FL 32301

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: ORCA INDUSTRIES INC
(Name of Corporation)

DOCUMENT NUMBER: POS00097276

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:

DAVE SULLIVAN
(Name of Contact Person)

ORCA INDUSTRIES
(Firm/Company)

3830 PATRICK ROAD
(Address)

SOUTH POFT FLA 32409
(City/State and Zip Code)

For further information concerning this matter, please call:

DAVE SULLIVAN at (850) 234-4162
(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 of FLA
in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: ORCA INDUSTRIES INC.
2. The principal office address: 3830 PATRICK ROAD
SOUTH PORT FLORIDA 32409
3. The mailing address (if different): SAME
4. Date of incorporation/qualification: JULY 11, 2005 Document number: PD5000097276
5. The name and street address of the current registered agent and registered office on file with the
Florida Department of State:

FORM-A-CORP (MERYL BARNES)
100 VILLAGE SQUARE CROSSING
SUITE 103 PALM BEACH GARDENS FL 33410-4531

6. The name and street address of the new registered agent (if changed) and /or registered office
(if changed):

GEORGE DAVID SULLIVAN
3830 PATRICK ROAD
(P.O. Box NOT acceptable)
SOUTH PORT FLA. 32409

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]
(Signature of an officer or director)

G-D SULLIVAN DPST
(Printed or typed name and title)

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]
(Signature of Registered Agent)

8-31-06
(Date)

If signing on behalf of an entity:

G-D SULLIVAN
(Typed or Printed Name)

*** 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)