Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name

: CORPORATE CREATIONS INTERNATIONAL

Account Number: 110432003053

Fax Number

: (561)694-8107 : (561)694-1639

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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REGISTERED AGENT CHANGE DEVCON MANAGEMENT CORP.

Certificate of Status	0		
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Page Count	02		
Estimated Charge	\$35.00		

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MAR 1 2 2013

T. LEWIS

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: DEVCON MANAGEMENT CORP.	
2. The principal office address: 3880 N. 28TH TERRACE	
HOLLYWOOD FL 33020	
3. The mailing address (if different):	
4. Date of incorporation/qualification: 08/09/2005 Document number: P05000110604	_
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)	<u>ာ</u>
MACDONALD, ANN M	بر ک
3880 N. 28TH TERRACE	7
HOLLYWOOD FL 33020	
6. 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 #221E	
PO. Box NOI acceptable	
Palm Beach Gardens, FL 33410	
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.	
STEVE HAFEN, CEO/Director by: Kristine Roy, Atty-in-Fact Printed or typed name and title	
hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to commy with the provisions of all Motutes relative to the proper and complete sterformance of my muties, and I am Immifar with and accept the obligation of my position as registered agent for it fine document is being filed merely to reflect a change in the registered office address. I hereby tonitim that the surporation has been notified in writing of this change.	
03/11/2013	
If signing on behalf of an entity:	
Kristine Floy, Special Secretary	
* * * 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 (03/12)