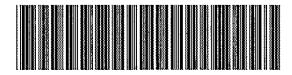
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August 23, 2006

Division of Corporations ATTN: AMENDMENT SECTION P. O. Box 6327 Tallahassee, FL 32314

RE: WEIGHT-N-SEA ADVENTURES, INC.

To Whom It May Concern:

Enclosed you will find the original Statement of Change of Registered Agent for WEIGHT-N-SEA ADVENTURES, INC., incorporated by Document Number P06000008951 on January 17, 2006. Also enclosed is a check in the amount of \$35.00 for the filing fee.

Please return the stamped copy to Donald Robert Weeks, CPA, 1405 Park Avenue, Suite 102, Fernandina Beach, FL 32034.

Thank you in advance for your assistance. If you have any questions, please call me at (904)206-4370.

Sincerely,

Rob Weeks

Enclosures

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of chan	rovisions of sections 607.030 ge is submitted for a corpora to change its registered offic	tion organized und	der the laws of the S	State of <u>Frot</u>	
1. The name of the	e corporation: WEIGH	T-N-SEA	ADVENTURES	, INC.	
2. The principal of	ffice address: 96003	SKIPPER	LANE		
	FERN	ANDINA BEA	ach, FL 32	2034	
3. The mailing ac	dress (if different):				
4. Date of incorp	oration/qualification: 01	17 /2006 D	ocument number:	P060000	08951
5. The name and Florida Depart	street address of the current r ment of State:	egistered agent and	d registered office o	n file with the	
	JOHN F.	EDGEL			
,	96003 SK	IPPER LANE		Ž č	06 \$
	FERNANDINA BEACH, FL 32034				
6. The name and (if changed):	96003 SKIPPER LANE FERNANDINA BEACH, FL 32034 Street address of the new registered agent (if changed) and /or registered office.				
	DONALD RO	BERT WEEKS	, CPA	S TA	ن و
	1405 PARK	AVENUE , S	SUITE 102	DF.	
(P.O. Box NOT acceptable)					
	FERNANDINA BEACH, FL 32934				
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 th	authorized by resolution de board, or the corporation h	ıly adopted by its as been notified i	board of directors n writing of the ch	or by an officer ange.	:so
Jhm	e of an officer or director)		JOHN F. E	DGEL	
, , ,	he appointment as registere comply with the provisions I am familiar with and acc g filed merely to reflect a cl been notified in writing of ti				performance t. Or, if this irm that the
2 to	412 St Week	CPA	8-2	3-2006	
(Sig	nature of Registered Agent)	_ 	(Dat	e)	<u> </u>
If signing on bel	alf of an entity:				
	POBERT WEEKS, CPA				
* * * 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)