1207000019355

| (Address) |
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| (Address) |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| (Document Number) |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
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| TO: Amendment Section Division of Corporations |
|---|
| SUBJECT: StormWatch loc. (Name of Corporation) |
| DOCUMENT NUMBER: P070000 19355 |
| 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: |
| Meridith Anzulis (Name of Contact Person) |
| StormWatch Inc. (Firm/Company) |
| 127 Stagrape Drive, #201 |
| Jupiter FL 33458 (City/State and Zip Code) |
| For further information concerning this matter, please call: |
| Meridith Anzulis (Name of Contact Person) at (561) 324 8840 (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 his |
| statement of change is submitted for a corporation organized under the laws of the State of |
| in order to change its registered office or registered agent, or both, in the State of Florida $\omega \approx \omega$ |
| 1. The name of the corporation: Storm Watch In C |
| 2. The principal office address: 2 Seagrape Drive, #20 SE = |
| Jupiter, FL 33458 \$5 5 |
| 3. The mailing address (if different): P. D. Box 14224 |
| North Palm Brach, PL 33408 |
| 4. Date of incorporation/qualification: 7/9/1999 Document number: P07000019355 |
| 5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: |
| Michael Murray |
| 3260 Mirella Dr |
| Riviera Brach FL 33404 |
| 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): |
| Michael Murray |
| 127 Segarage Drive #201 |
| (P.O. Box NOT acceptable) |
| |
| 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. |
| Meridith Anzulis Vice Pasident (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 of Registered Agent) July 10, 2007 (Date) |
| If signing on behalf of an entity: |
| Michael Murray (Typed or Printed Name) |