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SECRETARY OF STATE

RA
1Brown 8-18-11

Carl Johnson at (407) 705-7634

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

Jul 29 11 05:29p

Promodo USA Inc

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p. 1

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

Pursuant to the	provisions of sections 60 ange is substitled for a co	7.0502, 617.0: rporation ary	502, 607. printed to	.1508, or 61 rder the law	7.1508, Flore of the State	ida Statutes, 1 of Florida	hts			
in orde	er to change its registered	office or negl	Istored ag	ent, or both	, in the State	of Florida.				
i. The name of	the corporation: Promo	odo U√S.	A. 3	Inc.						
	office address: 8810 C			36, ORLA	NDO FL	32819 US		····		
						· · · · · · · · · · · · · · · · · · ·				
3. The mailing s	eldoess (if different):									
4. Date of incorp	Date of incorporation/qualification: 3/23/07 Document number: P07000					P070000	37435			
5. The name and Florida Depar	i street address of the curr transat of State: (If resign	ent registered ed, enter resig	l agent ar ned)	al registered	office on fil	e with the				
	JOHNSON, KERR	Y L MISS								
	7406 OCONEE ST	REET KISS	SIMME	E FL 3474	17 US		Zu	20		
							ECR A	81 3NV 110		
							CRETARY LAHASSEI	<u>8</u>		
6. The name and (if changed):	i street address of the new	A registered 95	Secut (11 ct	angeo) and	or reference	i onice	RY-	9		
							74. S.40	7		
	Discount Registere	d Agent					SEA.	≕		
			COT accepts				₩.	CO		
493 Boundary Blvd Rotonda West, Fl. 33947										
The street address changed will	ess of its registered offic be identical.	e and the stre	et addre	s of the bus	iness offica	of its register	ed agent,			
	es authorized by resoluti be board, or the corporat									
)-11T			_	~	ſ,	1			
Shappan	to fight should be unactor				Carl Johr					
I hereby accept I further agree of my duties, an document is being accompanion has	the appointment as reed to comply with the provi- al I am famultar with and ing filed merely to reflect to been notified in writing	stered agent to tions of all state accept the o to change in g of this change	and agre tatutes re bligation the regis	te to act in the lative to the total terms of the terms of the total terms of	his capacity proper and tion as regis address, I l	complete per tered agent tereby confin	formance Or, if this n that the			
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	parture of Regimened Agend			W 171. 3 =	Dete					
If signing on be	chalf of an entity:		Discount Account	R. Mitchell Registered Age Vanager	nt					
	eorge E. Mitchell yed or Prized Name		•							
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* * * FILING FEE: \$35.00 * * *

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CRZE045 (8/05)