| POTOON | 061304 |
|--|--------------------------|
| (Requestor's Name) (Address) | 900136288899 |
| (Address) (City/State/Zip/Phone #) | 10/03/0801006020 **35.00 |
| (Business Entity Name) (Document Number) Certified Copies Certificates of Status | 2009 NOY SECRETE |
| Special Instructions to Filing Officer: | HOY -7 PK 3: 48 |
| Office Use Only | |
| | R.A. Change |
| | TR 11-12-28 |

COVER LETTER

Amendment Section Division of Corporations TO: stems der SUBJECT me of Corporation) DOCUMENT NUMBER: PD 70000 30 61

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:

Vame of Contact Person

Enos Inc (Firm/

(City/State and Zip Code)

For further information concerning this matter, please call:

MA at Telephone Number) (Name of Contact Person)

Enclosed is a \$35.00 check made payable to the Department of State.

<u>Mailing Address:</u> 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



FLORIDA DEPARTMENT OF STATE Division of Corporations

October 10, 2008

DENISE KENNEDY-SOREK SOREK ADVANCED BUILDING SYSTEMS, INC. 5700 BAYSHORE RD #707 PALMETTO, FL 34221

SUBJECT: SOREK ADVANCED BUILDING SYSTEMS, INC. Ref. Number: P07000061304

We have received your document for SOREK ADVANCED BUILDING SYSTEMS, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6925.

Teresa Brown Regulatory Specialist II

Letter Number: 408A00053328

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Division of Corporations - P.O. BOX 6327 - Tallahassee, Florida 32314

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 the

| 1. The name of the corporation: Sorek Advanced Bud Building Steris The |
|--|
| 2. The principal office address: 5706 Bay Shore Rd ++ 706 Palmetto |
| F1. 3422 / |
| 3. The mailing address (if different): |
| <i></i> |
| 4. Date of incorporation/qualification: MAY 22, 2007 Document number: P07000061304 |
| 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) |
| American Salety Council Jac. |
| 5125 adamson St. # 500 |
| Orlando, El 32804 |
| 6. The name and street address of the new registered agent (if changed) and /or registered office |
| 6. The name and street address of the new registered agent (if changed) and /or registered office of the new registered agent (if changed): |
| 5200 Bauphore Rd # 706 mg - m |
| Jameto Horida |
| 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.

1chgel SoreK ΕO (Signature of an officer or director) (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

If signing on behalf of an entity:

alkfjsaldkfj (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)