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October 25, 2007

Author's E-mail Address: ecl@langfordlawgroup.com

Amendment Section Florida Department of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

RE: Etha

Ethanol Producers Corp.

Date of Incorporation: October 22, 2007

Document No.: P07000115772

Our File No.: 9827-001

Dear Sir/Madam:

Enclosed is a Statement of Change of Registered Agent for Ethanol Producers Corp. along with our check in the amount of \$35.00 made payable to the Florida Department of State for the filing fee.

Should you have any questions concerning this matter, please do not hesitate to contact me.

Very truly yours,

LANGFORD LAW GROUP, F

E. C. Langford

ECL/pac

Enclosures

UCC Filing & Search Services, Inc.

Ethanol Producers Corp.

P:\Users\ECL\Ethanol Producers Corp\Secretary of State Ltr RE Change of RA - 10-25-07.wpd

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

statement of cha	inge is submitted j	for a corporation org	9502, 607.1508, or 617.1508 ganized under the laws of the ristered agent, or both, in the	State of Florida	
1. The name of t	the corporation:	Ethanol Produ	icers Corp.		
2. The principal		3565 126th Av			
		Clearwater, H	FL 33762		
3. The mailing a	ddress (if differer	nt):			
4. Date of incorp	ooration/qualifica	tion: 10/22/07	Document number:	P07000115772	
	l street address of tment of State:	the current registered	d agent and registered office	on file with the	
	UCC Fil	ing & Search S	Services, Inc.		
	1574 Vi	llage Square I	Boulevard, Suite 100)	
	Tallaha	ssee, FL 32309)		2001
6. The name and (if changed):	E. C. L	angford st Cleveland S (P.O. Box NOT accepta FL 33606		stered office	2007 OCT 31 PM 2: 13
The street addre as changed will	ess of its registere be identical.	ed office and the stre	eet address of the business o	ffice of its registered age	ent,
Such change wa authorized by th	as authorized by a ne board, or the c	resolution duly adop orporation has been	oted by its board of directors notified in writing of the ch	or by an officer so lange.	
, ,	re of an officer or direc	•	•••	d name and title)	_
(Sig	enature of Registered A	gent)	and agree to act in this cap tatutes relative to the prope bbligation of my position as the registered office addres ge.	acity. r and complete performa registered agent. Or, if is, I hereby confirm that 29/07 te)	nce this the
If signing on be	half of an entity:				
	gford, Esqui Typed or Printed Name)				

* * * FILING FEE: \$35.00 * * *