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COVER LETTER

SUBJECT: Lee's Tae Kwon Do Academy, Inc.
(Name of Corporation)
DOCUMENT NUMBER: P08000011244
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:
Jennifer Schanzenbach (Name of Contact Person)
Lee's Tac Kwon a Academic
34026 US HWY 19 North
Pulm Harbor, FL. 34684 (City/State and Zip Code)
For further information concerning this matter, please call:
Jenn Her Schanzenback at (127) 185 5900 (Area Code & Daytime Telephone Number)
Enclosed is a \$35.00 check made payable to the Department of State.
Mailing Address: Amendment Section Street Address: Amendment Section

Division of Corporations *

2661 Executive Center Circle

Clifton Building

Tallahassee, FL 32301

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

TO:

Amendment Section Division of Corporations

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

statement of chang	ovisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this ge is submitted for a corporation organized under the laws of the State of Florida to change its registered office or registered agent, or both, in the State of Florida.
	e corporation: Lee's Tae Kwon Do Academy, Inc.
2. The principal of	
3. The mailing add	dress (if different):
4. Date of incorpo	eration/qualification: 03/2008 Document number: P08000011244
5. The name and s Florida Departm	street address of the current registered agent and registered office on file with the nent of State:
<u>_</u>	oden, Fraze & Associates, P.A.
4	4601 Central Avenue
\$	St. Petersburg, FL 33713
(if changed):	Tennifer L. Shanzenbace 34026 US HWY 19 NWHL Pulm Hubby FL 34684
as changed will b	
Such change was authorized by the	authorized by resolution duly adopted by its board of directors or by an officer so board, or the corporation has been notified in writing of the change.
Signatur	Janniker Schanzenback (Printed or typed name and title)
I further agree to of my duties, and document is bein	he appointment as registered agent and agree to act in this capacity. It comply with the provisions of all statutes relative to the proper and complete performance of all statutes relative to the proper and complete performance of am familiar with and accept the obligation of my position as registered agent. Or, if this age of the gistered office address, I hereby confirm that the been notified in writing of this change.
Any Sign	ature of Registered Agent) Material Agent (Date)
If signing on beh	alf of an entity:
Jenniter	rped or Printed Name)

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