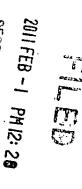
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**35.00

COVER LETTER

Division of Corporations
SUBJECT: Lotus Pond Development Inc.
DOCUMENT NUMBER: PO 800066 383
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:
Natalia Lambert Name of Contact Person
•
UTI Co Firm/Company
Firm/Company
.33 B almont Street
Address
Winthrop MA 02152 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call: No. folia land Roak (17 5790700
Name of Contact Person at (617, 5390300) Area Code & Daytime Telephone Number
•
T ()

* 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

CR2E045 (8/05)

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 ofin order to change its registered office or registered agent, or both, in the State of Florida.	
1. The name of the corporation: Lotus Rond Debelopment Inc	
72 D D + C L	_
2. The principal office address: 33 B umon West Winthrop MA 02152	_
3. The mailing address (if different):	_
4. Date of incorporation/qualification: 2008 Jules (Bocument number: PU 800066383	_
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)	
Incorp Services Inc.	
17888 67th Court North Est = Loxahatchee, FL 33470	ns;
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): **Mothalia Lambert** **P.O. Box NOT receptable** **Properties of the new registered agent (if changed) and /or registered office of the lamber of the lam	
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.	
Mat Lander or director Mat Lander or director Mat Lander 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 t 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.	
Made Agent 1/22/1	
If signing on behalf of an entity: Natalia Lambert	
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)