P09000006014

(Re	questor's Name)	
. (Ad	dress)	
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(Cit	y/State/Zip/Phon	e #)
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(Doe	cument Number)	
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SECRETARY OF STATE
TATILLAHASSEE FLORIDA

Appense Neces 11-29-11

COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: EBIZ TRUES Mints Fic. Name of Corporation
DOCUMENT NUMBER: P0900006014
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:
Name of Contact Person
EBIZ ENDENTMONTS FAC
925 Spoonbul Cuch
City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Contact Person at (9-39) 850-3249 Area Code & Daytime Telephone Number
Area Code & Daytine 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



November 8, 2011

TERRI RECKNOR **EBIZ INVESTMENTS, INC** 925 SPOONBILL CIRCLE WESTON, FL 33326

SUBJECT: EBIZ INVESTMENTS, INC

Ref. Number: P0900006014

We have received your document for EBIZ INVESTMENTS, INC and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The new registered agent listed in #6 must sign accepting the designation.

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) 245-6905.

Thelma Lewis Document Specialist Supervisor

Letter Number: 811A00025333

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: EDIZ Invisament, Inc	
2. The principal office address: 925 Spoon but Cuch Westen Pl 33326	
3. The mailing address (if different):	-
4. Date of incorporation/qualification: 01/31/3009 Document number: P0900006019	7
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) ERW Recknek	
Westen 79 33346 PR	
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):	
- Phoenix LAWLLC	
12800 University DLIVE # 200 P.O. Box NOT acceptable	
Ft Mydel, Fl 33907	
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.	
Signature of an officer or director 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 11/14/1 Date	
If signing on behalf of an entity:	
TERM' RECICION Typed or Printed Name	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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