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Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 617-6360

From:

Account Name : YOUR CAPITAL CONNECTION, INC.
Account Number : I20000000257
Phone : (850) 224-8870
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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REGISTERED AGENT CHANGE

ISHERWOOD AND KYLE, P.A.

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CAPITAL CONNECTION

NO. 2307 P. 2

**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 Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Isherwood and Kyle, P.A.
2. The principal office address: 11400 Overseas Hwy Suite 211,
Marathon Shores, Florida 33052
3. The mailing address (if different): _____
4. Date of incorporation/qualification: March 12, 09 Document number: 909000023263

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)

William D. DeVane, Jr., Esq.
5701 Overseas Hwy, Suite 1201
Marathon, Florida 33050

6. The name and street address of the new registered agent (if changed) and/or registered office (if changed):

Stephen Isherwood
11400 Overseas Highway, Suite 211
Marathon Shores, FL 33052
(P.O. Box NOT acceptable)

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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.

E. D. [Signature]
(Signature of an officer or director)

EUGENE LORREN KYLE, III
(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.

Stephen Isherwood
(Signature of Registered Agent)

03/17/09
(Date)

If signing on behalf of an entity:

Stephen Isherwood
(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

CR2B045 (8/05)