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DIVISION OF CORPORATIONS

REGISTERED AGENT CHANGE

LEDBETTER ENTERPRISES, INC.

Certificate of Status	0
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Page Count	01
Estimated Charge	\$35.00

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2/8/04

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change is submi	provisions of sections 607.0502, 617.0502, 607.1. tted for a corporation organized under the laws o sistered office or registered agent, or both, in the	f the State of FLORIDA	statement of in order		
I. The name of	he corporation: LEDBETTER ENTERPRISES,	INC.			
2. The principal	office address: 350 E. Las Olas Blvd.				
Fort Lau	derdale, Florida 33301				
3. The mailing a	ddress (if different):				
4. Date of incorp	poration/qualification: 03/01/93Do	ocument number: P93000015437			
	l street address of the current registered agent and tment of State:	registered office on file with the			
	SOUTH FLORIDA REGISTERED AGENTS	INC.			
	2673 NE 37th Drive				
6. The name and (if changed):	Fort Lauderdale, Florida 33308		O4 MAR SECRET ALLAH		
	d street address of the new registered agent (if changed) and for registered office		AHA HANA HANA HANA HANA HANA HANA HANA		
	Dale Ledbetter		-8 PM ARY OF ASSEE.		
	350 E. Las Olas Blvd., Sutic 1		ST ST		
	(P.O. Box or personal mailbox NO	器 5			
	Fort Lauderdale, Florida 33301		>		
The street addre	ess of its registered office and the street address identical.	of the business office of its registered	agent, as		
Such change with board, or the	is authorized by resolution duly adopted by its be corporation has been norther in writing of the	oard of directors or by an officer 30 a change.	uthorized by		
Director-Andrew D			ledberter		
Cripping &	ignature of an others or director)	(Printed of typed name and title)			
I hereby accept I further agree auties, and I an being filed mere been notified in	the appointment as registered agent and agree to comply with the provisions of all statutes relations and the provisions of all statutes relation from the provision of my properties to reflect a change in the registered office and writing of this change.	to act in this capacity, stive to the proper and complete perfor position as registered agent. Or, if this ldress, I hereby confirm that the corpo	mance of my s document is ration has		
/KL	Lettelles 1	March 3, 2004			
	Agenture of Registered Agent)	(Dase)			
If signing on be	half of an entity:				
	(Typed or Printed Name)	(Capzeiry)			

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

Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314