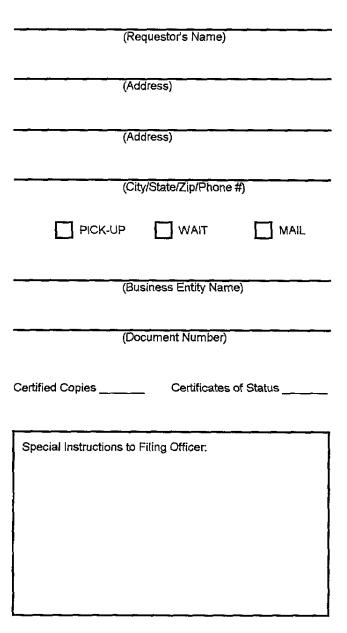
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Office Use Only



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LLAHASSEE, FLORIDA

R.A. change

T BROWN OCT 2 5 2005

COVER LETTER

TO: Amendment Section Division of Corporations

THE Florida Dest Solution, TWC

DOCUMENT NUMBER: P9 50011056851

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:

DAVID BIFFLEDGINA MOZZA
(Name of Contact Person)

THE FLORIDA DEGT SOLUTIONS, INC.
(Firm/Company)

Lake Worth FU 33467
(City/State and Zip Code)

For further information concerning this matter, please call:

Chiala HOZA SLot 432-333 (Person) (Area Code & Daytime Telephone N

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

~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 <u>FIOTICIA</u> in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: THE Florida Dest SOLUTION, Inc.
2. The principal office address: 9/28 San Vittore Street
LABELWOTHL, FL 33467
3. The mailing address (if different): Save. a.s. a bove
4. Date of incorporation/qualification: 1/24/95 Document number: P9500005685/
5. The name and street address of the current registered agent and registered office on file with the
Florida Department of State: (DAVID RIFFIE)
THE Florida REST SOLUTION INC 20 3
1375 GOKUYUL BIVA SUNK#5KE S
Dough a Panelli F1 331123
DYIN DEACK, FU 30 702 PE 2 0
6. The name and street address of the new registered agent (if changed) and /or registered office
(if changed):
DAVID RIFFIE. LITTLE Florida PESTS'OluFION, Inc
9/028 Sand VI Hore Street (P.O. Box NOT acceptable)
LAREWORTH, F1, 33467
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.
In DAVID Retale
(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.
D+ 17.245
(Signature of Registered Agent) (Date)
If signing on behalf of an entity:
Down Likele
(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