## P96000007891

| (Re                                     | questor's Name)   |           |
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## TRANSMITTAL LETTER

| TO: Amendment Section Division of Corporations                                                                                                                                                         |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| SUBJECT: Working Cow Homemade, Inc. (Name of corporation)                                                                                                                                              |
| DOCUMENT NUMBER: 19600007891                                                                                                                                                                           |
| 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:                                                                                                                              |
| Timothy Pappas (Name of person)                                                                                                                                                                        |
| Working Cow Homemade, Inc. (Name of firm/company)                                                                                                                                                      |
| 5150 Ulmerton Rd, #15 (Address)                                                                                                                                                                        |
| Clearwater FL 33760<br>(City/state and zip code)                                                                                                                                                       |
| For further information concerning this matter, please call:                                                                                                                                           |
| MARY Petersen at (727) 572-725   (Name of person) (Area code & daytime 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 409 E. Gaines Street Tallahassee, FL 32399 |

## 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 $Floride$ , in order                                                                                                                                                                                                                                                                    |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| to change its registered office or registered agent, or both, in the State of Florida.                                                                                                                                                                                                                                                                                                                                                                                                       |
| 1. The name of the corporation: Working Cow Homemade, Inc.  2. The principal office address: 5150 41 merton Rd, Ste 15  Clear water FL 33760                                                                                                                                                                                                                                                                                                                                                 |
| 3. The mailing address (if different):                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
| 4. Date of incorporation/qualification: 1/25/96 Document number: P9600007891                                                                                                                                                                                                                                                                                                                                                                                                                 |
| 5. The name and street address of the current registered agent and registered office on file with the  Florida Department of State:                                                                                                                                                                                                                                                                                                                                                          |
| Engel Timothy C                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |
| 6430 - 4th Palm Point Eu =                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
| Saint Pele Beach FL 33706 FF = T                                                                                                                                                                                                                                                                                                                                                                                                                                                             |
| 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):                                                                                                                                                                                                                                                                                                                                                                              |
| Pappas, Timothy 6                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |
| 4525 Columbus—Way South Fin - (P.O. Box or personal mailbox NOT acceptable)                                                                                                                                                                                                                                                                                                                                                                                                                  |
| Saint Petersburg FL 33712                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
| 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, on the corporation has been notified in writing of the change.                                                                                                                                                                                                                                                                                                  |
| (Signature of an orlicer or director)  Timothy 6. Pappas President (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 notificatin writing of this change. |
| Two the A Tallow 12/29/03                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
| (Signature of Registered Agent) (Date)  If signing on behalf of an entity:                                                                                                                                                                                                                                                                                                                                                                                                                   |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |
| (Typed or Printed Name) (Capacity)                                                                                                                                                                                                                                                                                                                                                                                                                                                           |

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