Pap 00001a000 Office Use Only CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known): 1. (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) Certified Copy Pick up time _ ☐ Walk in Photocopy Certificate of Status Will wait Mail out AMENDMENTS NEW FILINGS --Profit Amendment Resignation of R.A., Officer/Director NonProfit Change of Registered Agent Limited Liability Dissolution/Withdrawal Domestication 5H 3/7 Other Merger REGISTRATION/ OTHER FILINGS QUALIFICATION Annual Report Foreign Fictitious Name Limited Partnership Name Reservation Reinstatement Trademark

Examiner's Initials

Other

Florida Department of State, Sandra B. Mortham, Secretary of State

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, the undersigned corporation organized under the laws of the State of Florida submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida. 1a. The name of the corporation is: _____ 1b. The mailing address of the corporation is: 13 Palm Orive Key Largo, Florida 1c. Date of incorporation: April 1996 Document number: 2. The name and address of the current registered agent and office: 13 Palm Drive Key Largo, Florida 33037 3. The name and address of the new registered agent and office: (P.O. Box Not Acceptable) JUliana P. Walton Secretary 13 Palm Orive Key Largo, Florida, 33037 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 March 1. (Date) President Charles H. Walton Jr. (Printed or typed name and title) Having been named as registered agent and to accept service of process for the above stated corporation, 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. March 1, 1997 (Signature of Registered Agent (Date) If signing on behalf of an entity: Juliana P. Walton

Division of Carparations, P.O. Ray 6327 Tattahasean Ft. 32214

(Gapacity)

(Typed or Printed Name)