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 the undersigned corporation organized under the submits the following statement in order to change it both, in the State of Florida. | , 607.1508, or 61 le laws of the s registered offic | 7.1508, Florida Statutes, State of Florida e or registered agent, or |
|--|---|---|
| 1a. The name of the corporation is:Drinkwater Marit | ime Corporation | |
| 1b. The mailing address of the corporation is : 12 Cle | earwater Mall, (| clearwater, FL 34624 |
| 1c. Date of incorporation: 7/24/96 Doc | ument number: | P96000062574 |
| 2. The name and address of the current registered ag | ent and office: | 12 P. |
| 333 Island Way, #204 | | "题美" |
| Clearwater, FL 34630 | \ | |
| 3. The name and address of the new registered agent a | nd office:(P.O. Bo | x Not Acceptable) |
| Gary N. Strohauer | | 5 |
| 1150 Cleveland Street, Suite 3 | 00 | - |
| Clearwater, FL 34615 | | _ |
| The street address of its registered office and the streegistered agent, as changed, will be identical. | reet address of t | the business office of it |
| Such change was authorized by resolution duly adopted so authorized by the board. | d by its board of | directors or by an office |
| (Signature of an officer, chairman or | | <u>Nocembre 1990</u> (Date) |
| (Signature of an officer, chairman or vice chairman of the board) | | |
| W. Robert Drinkwater, President (Printed or typed name and tide) | | |
| Having been named as registered agent and to accept corporation, thereby accept the appointmentas register I further agree to comply with the provisions of all staperformance of my duties, and I am familiar with an registered agent. | ntutos rolativo to | the omner and complet |
| | 11-7/- | -91. |
| (Signature of Registered Agent) | 12-26- | (Date) |
| If signing on behalf of an entity: | | |
| Gary N. Strohauer | Registered A | gent |
| (Typed or Printed Name) | (Capacity) | |
| Division of Corporations, P.O. Box 63 | 27, Tallahassee, | , FL 32314 |

CR2E045(11/94)

FILING FEE: \$35.00