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JONATHON H. GLUGOVER

Attorney at Law

Jurisdictions Admitted Florida Georgia

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August 11, 1997

Division of Corporations P.O. Box 6327 Tallahassee, Fl. 32314

100002265431--2 -08/13/97--01034--005 *****35.00 *****35.00

To Whom it May Concern,

Enclosed please find a Statement of Change of Regidtered Agent. Also please find my firm check for \$35.00. Please let me know if there are any problems.

Very Truly Yours,

Appathon H. Glugover, Esquire

JHG/keb

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SECRETARY OF STATE

R.A. Change

8-20-97

of the with a translation with a

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
1. The name of the corporation is: FEAT FINDT SNHW Prides, INC
4187 DATITY COURT, PORT OFFINGE, FL 32127
2. The mailing address of the corporation is: 4187 DAILY Court
POYT OVANGE, PL JUIZ7
3. Date of incorporation/qualification:
ROBERT T. SMAILWOOD, II
P.O. Box 46/3
SAra JOTA FL 34230-4613
Sara JoTA FL 34 230 - 46/3 5. The name and address of the new registered agent and office: (P.O. Box Not Acceptable)
JONATHON H. GIUGOVEN ESS.
444 SEA Breeze Blud, Soite 640
DAYford Beach, FL 32118
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.
(Musi Shum 8/4/97
(Signature of an officer, chairman or vice chairman of the board) (Date)
EDENNIS TEINEW PRES.
(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.
8-11-97
(Signature of Registered Agent) (Date) It signing on behalf of an entity:
(Typed or Printed Name) (Capacity)

FILING FEE: \$35.00

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