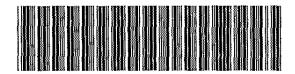
P97000004459

| (Requestor's Name) | | | | | | |
|---|---|--|--|--|--|--|
| (Address) | _ | | | | | |
| (Address) | | | | | | |
| (City/State/Zip/Phone #) | | | | | | |
| PICK-UP WAIT MAIL | | | | | | |
| (Business Entity Name) | | | | | | |
| (Document Number) | | | | | | |
| Certified Copies Certificates of Status | _ | | | | | |
| Special Instructions to Filing Officer: | | | | | | |
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07/31/06--01010--004 **35.00



COVER LETTER

| TO: Amendment Section Division of Corpo | on rations | |
|---|--|--|
| SUBJECT: | Steven Smith, It | |
| DOCUMENT NUMBER | :P9700004459 | |
| The enclosed Statement o | f Change of Registered Office | e/Agent and fee are submitted for filing. |
| Please return all correspor | ndence concerning this matter | to the following: |
| <u>L.A. I</u> | Perkins, Esquire | |
| | (Name of Cor | ntact Person) |
| <u>Buck</u> | ingham, Doolittle & Br (Firm/Co | urroughs, LLP mpany) |
| <u>5355</u> . | Town Center Road, S | uite 900 |
| | (Audi | ress) |
| Boca I | Raton, FL 33486 | |
| | (City/State an | d Zip Code) |
| For further information co | ncerning this matter, please c | all: |
| L.A. Perkins, Esquire | Contact Person) | at (561) 241-0414 (Area Code & Daytime Telephone Number) |
| • | k made payable to the Depart | , , |
| D P | Iailing Address: Imendment Section Division of Corporations IO. Box 6327 Callahassee, FL 32314 | Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle |

Tallahassee, FL 32301

Tallahassee, FL 32314

TO:

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

| Pursuant to the provisi statement of change is | submitted for a corp | oration organiz | ed under the laws of | the State of | Florida | s | |
|---|--|---|---|----------------------|----------------|---------------------------------|--|
| | ange its registered o | _ | | the State of | Florida. | | |
| 1. The name of the cor | | Steven Smith, Inc. | | | | | |
| 2. The principal office | address: | P.O. Box 44 | 93, Key West, FL | _ 33041 | | | |
| 3. The mailing address | (if different): | (Same) | | | | | |
| 4. Date of incorporation | n/qualification: | 01/16/97 | Document numl | er: P | 970000044 | 459 | |
| 5. The name and street Florida Department | | nt registered age | ent and registered of | fice on file v | vith the | *** | |
| Stev | en Smith | | | | | 90 | |
| P.0 | . Box 810910 | | | | | The state of | |
| Boc | a Raton, FL 33 | 3481 | • | · | | | |
| 6. The name and street (if changed): | address of the new r | egistered agent | (if changed) and /or | registered o | ffice | | |
| BD | 3 Agent Co. | | | | | E C | |
| 535 | 5 Town Cente | r Road, Su | uite 900 | | · . | i did | |
| Boo | a Raton, FL 3 | • | | | | - ·2: | |
| The street address of it as changed will be ide | ts registered office a | and the street ac | ddress of the busine | ss office of | its registered | l agent, | |
| Such change was auth authorized by the bear | drized by resolution d, or the corporation | duly adopted la has been noti | by its board of directified in writing of the | tors or by a change. | in officer so | | |
| (Signature of an | undans | | Steven Smith, | President | | | |
| I hereby accept he ap I further agree to com of my duties, and I am document is being filed corporation has been BDB Agent Co. | pointment as register oly with the provision familiar with and a dimerely to reflect a motified in writing o | ered agent and ons of all statut ccept the oblig change in the f this change. | • | | • | rmance r, if this hat the | |
| | (. Gonget Registered Kgent) | | 07/19/2006 | | | | |
| (Signature of | Registered Agent) | | | (Date) | | | |
| If signing on behalf of | an entity: | | | | | | |
| Rana M. Gorzeck, Es | quire, Assistant Se | cretary | ير منعوه ي | 4. . | , | | |
| | * * * | FILING FEE | : \$35.00 * * * | | | | |

Make Checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 CR2E045 (8/05)