

P97000057410

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FILED  
JUN 10 AM 9:30  
TALLAHASSEE, FLORIDA  
(800) 251-5533  
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(813) 251-1900

June 8, 1998

Secretary of State  
Division of Corporations  
Post Office Box 6327  
Tallahassee, Florida 32314

800002554728--4  
-06/10/98--01054--008  
\*\*\*\*\*35.00 \*\*\*\*\*35.00

Re: D & L Island Enterprises, Inc.

Dear Sir or Madam:

Enclosed is a Statement of Change of Registered Office and Registered Agent for D & L Island Enterprises, Inc. The registered agent and office changed recently and that necessitated the filing of this Statement of Change.

Also enclosed is a check in the amount of \$35.00, made payable to the Secretary of State, to cover the cost of filing this change.

If you need any additional information in order to process this matter, please let us know.

Called 6/15  
MURIEL

Very truly yours,

LANGFORD & HILL, P.A.

Muriel Desloovere

AUTHORIZATION BY PHONE TO  
CORRECT ADD current  
DATE 6-15  
MD/mjw  
Enclosures 2

MD/mjw  
Enclosures 2

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Each  
6/15

Charter No. P97000057410

Date Filed 6-30-97

**STATEMENT OF CHANGE OF REGISTERED OFFICE  
AND REGISTERED AGENT**

Pursuant to the provisions of Sections 607.0501 and 607.0502, or 607.1508, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement for the purpose of changing its registered agent in the State of Florida.

1. The name of the corporation is D & L Island Enterprises Inc.

2. The name and address of its present registered agent is:

CORPORATION SERVICE COMPANY

1201 HAYS STREET

TALLAHASSEE, FL 32301-2525

3. The name and street address to which its registered agent is to be changed is:  
(P.O. BOX NOT ACCEPTABLE)

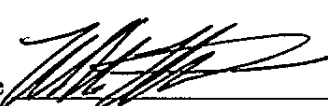
Muriel Desloovere

1715 W. Cleveland Street

Tampa, Florida 33606

4. The street address of its registered office and the street address of the business office of its registered agent, as changed, are identical.

5. Such change was authorized by resolution duly adopted by its board of directors or by an officer of the corporation so authorized by the board of directors.

Signature   
(President or Vice President)

Date 6/3/98

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, 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 UNDER SECTION 607.0505, FLORIDA STATUTES.

Please Print/Type Name Muriel Desloovere

Signature 

Date June 8, 1998

**FILING FEE \$35**

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98 JUN 10 AM 9:30  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA