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MICHAEL HALPERN, P.A.

ATTORNEY AT LAW 209 DUVAL STREET KEY WEST, FL 33040

Other

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

| | 1. | | | | 'UU2604066 -07/31/9801056 | 3- 0 |
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| | (Corporation Name) | | (De | ocument #) | ******** | |
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| | Profit | Amendme | nt | | Princes | |
| | NonProfit Resignation of R.A., C Limited Liability Change of Registered Domestication Dissolution/Withdraw | | n of R.A., Officer/Direc | etor | _Б . | |
| | | | Registered Agent | - | - | |
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| | Other | Merger | | | | |
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| | OTHER FILING | | STRATION/ | | , R ⁻² | |
| | Annual Report | | IFICATION | | 7 9 | |
| | Fictitious Name | Foreign | | , 00 | · M. | |
| | Name Reservation | Limited Pa | rtnership | J 0 00 | J 0/2 | |
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CR2E031(1/95)

Examiner's Initials

| Charter No. | |
|---|---|
| Date Filed | |
| 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 office and registered agent in the State of Florida. | - |
| 1. The name of the corporation is: 5.5. Daytona Beach, Inc. | |
| 2. The name and address of its present registered agent is: | - |
| CSC THE UNITED STATES CORPORATION COMPANY 1201 Hays Street Tallahassee, Florida 32301 | - |
| 3. The <u>name and street address to</u> which its registered agent is to be changed is: (P. O. BOX IS NOT ACCEPTABLE) | |
| Michael Halpern 209, Duval Street Xey Dost Elonida 23040 | |
| 4. The street address of its registered office and the street address of the business of its registered agent, as changed, are identical. | |
| 5. Such change was authorized by resolution duly adopted by its board of directors of board of directors of the corporation so authorized by the board of directors. | |
| (Typed or printed name and title) Signature (President or Vice President) | |
| Date July 27, 1998 | |
| 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 Michael Halpern | |
| Signature (Agent) | |
| Date 3014 27, 1998 | |
| FIT INC FFF \$25 | |