P98000024540

| • |
|---|
| (Requestor's Name) |
| (Address) |
| (Address) |
| |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| • |
| (Business Entity Name) |
| (Document Number) |
| (Boodinest Number) |
| Certified Copies Certificates of Status |
| |
| Special Instructions to Filing Officer: |
| |
| |
| |
| |
| |
| |

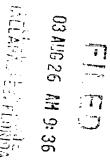
Office Use Only

LA SOL



000022519810

08/26/03--01070--001 **210.00



TRANSMITTAL LETTER

| TO: Amendment Section Division of Corporations |
|--|
| SUBJECT: Premiere Investment Capital, Inc. (Name of corporation) |
| DOCUMENT NUMBER: P98000024540 |
| The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing |
| Please return all correspondence concerning this matter to the following: |
| Kristina Mumford (Name of person) |
| Premiere Investment Capital, Inc. (Name of firm/company) |
| 1505 Main Street, Suite 1109 (Address) |
| Sarasota, FL 34236 (City/state and zip code) |
| For further information concerning this matter, please call: |
| Kristina Mumford at (941) 955-1999 (Name of person) (Area code & daytime telephone number) |
| Enclosed is a \$35.00 check made payable to the Department of State. |
| Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address: Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399 |

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

| Pursuant to th | e provisions of sections 607.0502, | , 617.0502, 607.1508, or 617.1508, | , Florida Statutes, |
|---|--|---|-----------------------------------|
| this statement o | of change is submitted for a corpor | ation organized under the laws of th | ie State of |
| Florida _ | in order to change its regi | istered office or registered agent, or | r both, in the State |
| of Florida. | | | |
| 1. The name of | the corporation: <u>Premiese Inv</u> | estment Capital, Inc. | |
| 2. The principa | d office address: 1605 Main St | reet, Suite 1109, Sarasota | , FL 34236 |
| 3. The mailing | address (if different): | | |
| 4. Date of inco | rporation/qualification: 3/16/98 | Document number: | 98000024540 |
| 5. The name ar | | stered agent and registered office on | |
| | Beth L. Clause | | |
| | 1605 Main Street, Sui | te 1109 | A C |
| | Sarasota, FL 34236 | · · · · · · · · · · · · · · · · · · · | 103 A |
| 6. The name a changed): | and street address of the new regis | stered agent (if changed) and /or re | egistered office lif |
| | <u>Ríchard Champlin</u> | | - 5 € 17 |
| | 1605 Main Street, Sui (P.O. Box or personal | te 1109 I mailbox NOT acceptable) | 9:36 - ORID, |
| | Sarasota, FL 34236 | | |
| The street add agent, as chan | ress of its registered office and the ged will be identical. | e street address of the business offic | e of its registered |
| K | vas authorized by resolution duly a the toard, or the corporation has b co chairman or vice chairman of the board) | adopted by its board of directors or been notified in writing of the change. Richard Champlin, CFO (Printed of typed name and title) | |
| I hereby accept a further agree performance of registered age office address, | ot the appointment as registered age to comply with the provisions of of my duties, and I am familiar wit | gent and agree to act in this capaciall statutes relative to the proper as the and accept the obligation of my possible merely to reflect a change in that ation has been notified in writing of 122/03 | ty. nd complete position as |
| If signing on beh | , - | (Date) | |
| Digining Oil Ooli | | من من | |
| | (Typed or Printed Name) | (Capacity) | |

* * * FILING FEE: \$35.00 * * *