P99000035011

(Re	equestor's Name)	
(Address)		
(Address)		
(Cit	y/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL .
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to Filing Officer:		
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SECRETARY OF STATE
TALLAHASSEE FLORIDA



COVER LETTER

Enclosed is a \$35.00 check made payable to the Department of State.

Q.

Amendment Section

TO:

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

G

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, this statement of change is submitted for a corporation organized under the laws of the State of
in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: INVESTMENT MOVEQUE INTERNATIONAL INC.
2. The principal office address: 925 S. Semovan Blvd, Suite 110A
Winter Park, PL 32792
3. The mailing address (if different): Same as a bove -
4. Date of incorporation/qualification: 31899 Document number: P99000025011
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
Henry B Carpenter
1277 N. Semovan Blvd, Suite 115
Orlando, FL 32807
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Henry B corpenter
925 S. Semoran Blvd, Suite 10A SE = ==
Winter Park, 12 32792
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, or the corporation has been notified in writing of the change.
1 Henry B Compenter, President (Printed or types harme and title)
hereby accept the appointment as registered agent and agree to act in this capacity. further agree to comply with the provisions of all statutes relative to the proper and complete performance if my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this locument is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.
747 2/12/07
(Signature of Registered Agent) (Date)
f signing on behalf of an entity:
(Typed or Printed Name)

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (8/05)

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