## 99000038628

Office Use Only



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07/17/07--01003--001 \*\*35.00

C. Coulliette JUL 1 '6 2007

CORPORATE ACCESS,	"When you need ACCESS to the world"
\ INC. \	236 East 6th Avenue . Tallahassee, Florida 32303 66 (32315-7066) (850) 222-2666 or (800) 969-1666 . Fax (850) 222-1666
PIC	WALK IN 7/16
CERTIFIED COPY	
PHOTOCOPY	
CUS FILING	Amendement
1. Encon Tute. (CORPORATE NAME AND DO	-raflored Tuc
2. (CORPORATE NAME AND DO	OCUMENT #)
3. (CORPORATE NAME AND DO	CUMENT (t)
4. (CORPORATE NAME AND DO	OCUMENT #)
5. (CORPORATE NAME AND DO	OCUMENT #)
6. (CORPORATE NAME AND DO	OCUMENT #)
SPECIAL INSTRUCTIONS:	

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, inge is submitted for a corporation organized under the laws of the State of Florida.  To change its registered office or registered agent, or both, in the State of Florida.	this EIDA		
1. The name of	the corporation: ENCON INTERNATIONAL, INC.	• :-		
2. The principal	office address: 1564 TRAVERTINE TER  OFL 32771	,		
3. The mailing a	address (if different):			
4. Date of incoη	poration/qualification: 04/26/1999 Document number: P99000038628	3		
	I street address of the current registered agent and registered office on file with the trment of State:			
	WILLITS, CHARLES W.			
	1407 EAST ROBINSON ST	TAL SI	<b>&gt;</b>	
	ORLANDO FL 32801-2118	CRE	=	
6. The name and street address of the new registered agent (if changed) and /or registered office			- - -	
	PARACORP INCORPORATED	FLOR FLOR	<u>-</u>	
	236 EAST 6TH AVE		5	
	(P.O. Box NOT acceptable)  TALLAHASSEE FL 32303			
	ss of its registered office and the street address of the business office of its register be identical.  Is authorized by resolution duly adopted by its board of directors or by an officer see board, or the corporation has been notified in writing of the change.			
JOHN.W-PRIEST. CHAIRMAN & C.E.O  (Printed or typed name and title)				
I herdby accept I further agree t of my duties, and document is beit corporation has	the appointment as registered agent and agree to act in this capacity. o comply with the provisions of all statutes relative to the proper and complete pe d I am familiar with and accept the obligation of my position as registered agent. ng filed merely to reflect a change in the registered office address, I hereby confir been notified in writing of this change.	rformance Or, if this m that the		
Hinh of	JULY 9, 2007  (Date)			
Paracori	half of an entity:  New York of Printed Name)			

\* \* \* 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)

APPROVEL