Requester's Name Office Use Only CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known): (Corporation Name) (Document #) 9000051770<u>7</u>9 (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) **□** Walk in Pick up time Certified Copy ☐ Will wait Photocopy Mail out Certificate of Status **NEW FILINGS** AMENDMENTS Profit Amendment Resignation of R.A., Officer/Director Not for Profit ☐ Change of Registered Agent Limited Liability Dissolution/Withdrawal Domestication Other Merger **OTHER FILINGS** REGISTRATION/QUALIFICATION ☐ Foreign Annual Report ☐ Fictitious Name Limited Partnership Reinstatement Trademark Other CR2E031(7/97)

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

	e provisions of sections					utes,	
	d corporation organized						-
submits the foll	owing statement in orde	r to change its	registered offic	e or registered	agent, or bot	h, in	
the State of Flo	rida.			. , , ,			
1. The name of	the corporation: Sec	MC CON	GOWINID	$\omega_{A'}\tau_{\nu}$	<u> </u>		
			_				<u> </u>
2. The mailing	address of the corporation	n: 1012	<u> Peacce</u>	2 DC.			<u> </u>
		_	rwater,		5764		
3. Date of inco	rporation/qualification:	1970	Docum	ent number: \frac{\frac{1}{2}}{2}	119908	<u> </u>	_
4. The name an	d address of the current	registered agent	and office:				
	RICHARD DO	or uBLE	1ser				
	1012 Pearce	2 Dr.	#207				
	Clearwater, F						
5. The name an	d address of the new reg	istered agent (if P. O. Box Not A	changed) and/o	r registered off	ice (if change	:d):	
	`		• '	1 -			
	Community	,	_	on celeta	LNC.		
	YITS EAST						
	Clearwater	, FL 3:	3764		**.		
The street addragent, as chang	ess of its registered officed, will be identical.	ce and the stree	et address of the	business offic	e of its regist	ered	
Such change w	as authorized by resolut	ion duly adopte	ed by its board o	of directors or	by an officer	so	
Authorized by the	William .			3/a<	03		
(Signature	of an officer, chairman or vice	chairman of the boa	rd)	(Dat	e)		-
Henn	with Jobe	Pros			•		
	(Printed or typed name a	•		. Total		0	
Having been n	amed as registered ager hereby accept the appoi to comply with the prov f my duties, and I am fai	nt and to accept	t service of proceed and	ess for th <mark>e a</mark> bo	ve stated n this capacii	tv E	SEC
I further agree	to comply with the prov	visions of all stomiliar with and	itutes relative to	the proper an	d complete	" 完	
registered age	rt.	miliar wiin ana	accept the ooti	ganon oj my p	osition as	29	F CC
Dormal	aldeleronald			<u> </u>	02		중우급
1	Signature of Registered Agent)		<u></u>	(Date)		တ္	STAI
If signing on beha	olf of an entity:	•		911		ណ	
XATHY	Hube Cabe (Typed or Printed Name)	<u> </u>		(Capacity)	····		. =
	/->Lan at v villian r (mina)			47			

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