## 200004

## Florida Department of State

Division of Corporations Public Access System

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Fax Number : (850)205-0380

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023

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## REGISTERED AGENT CHANGE

FLORIDA LESSOR - LAKELAND, INC.

Certificate of Status	0
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TLOOK- 09/17/51 CT Systems Optime

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

Pursuant to	the provisions of section	s 607.0502, 617.0502,	607.1508, or 617.1508, Florida Statute	s,
	gned corporation organize			<u> </u>
	= :	ler to change its registe	ared office or registered agent, or both,	in .
the State of	Florida.  e of the corporation : Florid	a Federa - Tabaland Inc		
1. The name	e or me corporation, Florid	a Lessot - Deachard, mo.		<del></del>
2. The mail	ing address of the corporat	ion : 9690 Decreso Blvd. S	ite. 100 Timonium, MD 21093-6991	
	incorporation/qualification		Document number: Fozoooo 4	
4. The name	e and address of the curren	t tegistered agent and of	ed) and/or registered office (if changed);	
	Corporation Service Comp	DERRY		8 1
	1201 Hays Street		To the second	
•	Tallahasson, FL 32301		7	急二四
5. The name	e and address of the new re	gistered agent (if change	ed) and/or registered office (if changed)	A TO THE PARTY OF
		(P. O. Box Not Accepta	ole;	755 F
	CT Corporation System	<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>	<del></del>	ROK
	c/o CT Corporation System	m, 1200 South Pine Island R	Rosa,	7
	Plantation, Florida 33324			
The street a agent, as ch	ddress of its registered off anged, will be identical.	ice and the street addre	ss of the business office of its registered	
Such chang authorized	e was authorized by resolution the board.	tion duly adopted by it	s board of directors or by an officer so	
	26/2		7-15-93	_
(Signa	ture of an officer ensurem or vice	chairman of the board)	(Date)	
Michael E. Jon				,
Waring Law	(Printed or typed name a			
corporation I further ago performance registered a C T Corporati	i numed as regalered age, i. I hereby accept the appo ree to comply with the pro e of my duties, and I am fa gent.	nt that to accept service intment as registered a visions of all statutes re willar with and accept	e of process for the above stated gent and agree to act in this capacity. Elative to the proper and complete the obligation of my position as	
By:	UMAN Product		7-15-03	
V	(Signature of Reportered Agent)	Tyndell, Asst.	SCO Date)	
If signing on b	ehalf of an entity: LINAA	lythandy, 1100		
	(Typed of Printed Name)		(Capacity)	
	***	FILING FEE: \$35.00	)***	
CR2E045(9/00)	The contract of Garage	<b>.</b>		
	DIVISION OF CORPORATIONS	P.O. Box 6327	Tallahassee, PL 32314	