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Walk in Mail out	Pick up time Will wait	Photocopy	Certified Copy Certificate of Status	÷ ÷.
NEW FILINGS-	AMEN	DMENTS -		
Profit	Amendme	ent		
NonProfit	Resignati	on of R.A., Officer/Direct	or	
Limited Liability	Change o	f Registered Agent		
Domestication	Dissolutio	on/Withdrawal		
Other	Merger			
OTHER FILINGS Annual Report	QUA	ISTRATION/ LIFICATION		
Fictitious Name	Foreign			
Name Reservation	_	artnership		-
	Reinstater		10-7-98	-
	Trademar	k		

Examiner's Initials

Other

Florida Department of State, Sandra B. Mortham, Secretary of State

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

Pursuant to the provisions of section 607.0502, 617.0502, 607.1508 or 617.1508, Florida Statutes, the undersigned corporation organized under the law of the State of Florida submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

- 1. The name of the corporation is: FLORACORNER, INC.
- 2. The mailing address of the corporation is: 1950 Summit Park Drive, Suite 300, Orlando, FL 32810
- 3. Date of incorporation/qualification:

Document Number: J83052

4. The name and address of the current registered agent and office:

Anke Backer ZOM-Lee Office Center 2269 Lee Road Winter Park, FL 32789

5. The name and address of the new registered agent and office:

ZOM Properties, Inc. 1950 Summit Park Drive Orlando, FL 32810

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.

Signature of officer, chairman or vice chairman of the board

J- DE HEER President

Printed or typed name and title

Date

Having been named as registered agent and to accept service of process for the above stated corporation, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent.

Signature of Registered Agent Date

If signing on behalf of an entity:

SAMURI C. STEPHENS, TIL PRESIDENT OF ZOM PROPERTIES, INC.
Typed or Printed Name
Capacity