

M0200000 2758

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

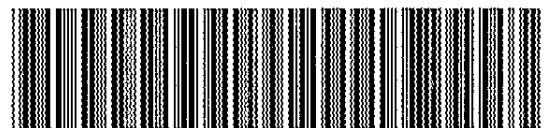
(Business Entity Name)

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CORPORATIONS
TALLAHASSEE, FLORIDA

J. BRYAN - AUG 20 2003

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: DATA Mapping and Imaging LLC
(Name of corporation)

DOCUMENT NUMBER: _____

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:

TIMOTHY W. DALEY Ph.D.
(Name of person)

DATA Mapping and Imaging LLC
(Name of firm/company)

2708 ALTERNATE 19 NORTH, Suite 602
(Address)

PalM Harbor Florida 31683
(City/state and zip code)

For further information concerning this matter, please call:

Timothy W. Daley Ph.D. at (726) 656 4575
(Name of person) (Area code & daytime telephone number)

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

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

Street Address:
Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

August 5, 2003

TIMOTHY N. DALEY PH.D.
DATA MAPPING AND IMAGING LLC
2708 ALTERNATE 19 NORTH, STE. 602
PALM HARBOR, FL 34683

SUBJECT: DATA MAPPING AND IMAGING LLC
Ref. Number: M02000002758

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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

We have received your document for DATA MAPPING AND IMAGING LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You completed the wrong form.

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6043.

Joey Bryan
Document Specialist

Letter Number: 203A00044583

*Sent on per
your request.
Any Questions: Call
My Cell 727 606 4000*

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company 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 limited liability company is: Data Mapping and Imaging LLC
2. The mailing address of the limited liability company is : 2708 Alternate 19 N Suite 602 Palm Harbor, FL 34683
3. Date of filing/registration in Florida September 13, 2000 4. Document number M02000002758

5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

The company Corporation
Name
P.O. Box 13397
Address
Philadelphia, PA 19101-3397
City, State and Zip

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TALLHASSEE, FLORIDA

6. The name and address of the new registered agent and/or office:

Timothy N. Daley Ph. D.
Name
2708 Alternate 19 N. Suite 602
Florida street address (P.O. Box NOT acceptable)
Palm Harbor, FL 34683
City, State and Zip

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Timothy N. Daley Ph. D.
(Signature of a member or authorized representative of a member)

Timothy N. Daley Ph. D.
(Printed or typed name of signee)

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 obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Timothy N. Daley Ph. D.
(Signature of Registered Agent)

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314