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Florida Department of State
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To:
Division of Corporations
Fax Number : (850)205-0380

From:
Account Name : EUGENE A. WIECHENS, P.A.
Account Number : I20010000161
Phone : (352)732-8622
Fax Number : (352)732-1162

FILED
03 MAY 23 AM 10:37
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

REGISTERED AGENT CHANGE

CAROLINA GROWLER OF FLORIDA, INC.

RECEIVED

03 MAY 23 AM 9:33

DIVISION OF CORPORATIONS

Certificate of Status	1
Certified Copy	0
Page Count	02
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TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: CAROLINA GROWLER OF FLORIDA, INC.
(Name of corporation)

DOCUMENT NUMBER: P02000014737

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:

Eugene A. Wiechens, Esquire
(Name of person)

LANDT, WIECHENS, LaPEER & AYRES
(Name of firm/company)

445 Northeast Eighth Avenue
(Address)

Ocala, Florida 34470
(City/state and zip code)

For further information concerning this matter, please call:

Eugene A. Wiechens, Esquire at (352) 732-8622
(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

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.

- 1. The name of the corporation: CAROLINA GROWLER OF FLORIDA, INC.
2. The principal office address: 2035 Northwest Eighth Avenue, Ocala, Florida 34475
3. The mailing address (if different):

4. Date of incorporation/qualification: February 8, 2002 Document number: P02000014737

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

William R. Crisp
3139 Southeast 7th Street
Ocala, Florida 34471

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

William R. Crisp
2035 Northwest Eighth Avenue
(P.O. Box or personal mailbox NOT acceptable)
Ocala, Florida 34475

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, or the corporation has been notified in writing of the change.

Signature of an officer, chairman or vice chairman of the board

William R. Crisp, President
(Printed or typed name and title)

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. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

Signature of Registered Agent

5/23/03
(Date)

If signing on behalf of an entity:

William R. Crisp
(Typed or Printed Name)

President
(Capacity)

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE AND MAIL TO:
DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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