Division of Corporations

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REGISTERED AGENT CHANGE

MILLS PASKERT DIVERS P.A.

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Corporate Filing Menu

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A Change 05/02/10/1060001229623)))

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STATEMENT OF CHANGE OF REGISTERED OFFIC. 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: Mills Paskert Divers P.A.		
2. The principal office address: 100 N. Tampa Street, Suite 2010, Tampa, FL 33602		
3. The mailing address (if different):		
4. Date of incorporation/qualification: 02/26/2002 Document number: P02000022202		
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:		
William Kalish	ur tag	ı <u>-</u>
100 South Ashley Drive, Suite 1500	0	ING IS
Tampa, FL 33602	6 HA	SICKE
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):	06 MAY -2	OF CO
American Information Services, Inc.	PM 2	CORPOR
401 E. Jackson Street, Suite 1700	2:38	
Tampa, FL 33602		SNO
The street address of its registered office and the street address of the business office of its registered as changed will be identical.	l agent,	i.
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.		
Jeffrey M. Paskert, Vice President		
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 perfect of my duties, and I am familiar with and accept the obligation of my position as registered agent. O document is being filed merely to reflect a change in the registered office address, I hereby confirm corporation has been notified in writing of this change.	rmance r, if thi. that the	2 \$
Tomat of Registered Agent) 5-2-06 (Date)		
If signing on behalf of an entity: Deborah L. Evans		
(Typed or Frinted Name)	•	
* * * FILING FEE: \$35.00 * * * Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 CR2E045 (8/05)		

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