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COVER LETTER

TO: Amendment Section Division of Corporations			
SUBJECT: CONLEY, MALLEY & GOLSON P.A. (Name of Corporation)	A. ••••••••••••••••••••••••••••••••••••		
DOCUMENT NUMBER: P08000031707			
The enclosed Statement of Change of Registered Office/Agent a	and fee are submitted for filing.		
Please return all correspondence concerning this matter to the fo	ollowing:		
Jerrold J. Golson			
(Name of Contact Person)			
CONTEX MALLEY & COLOON D.A			
CONLEY, MALLEY & GOLSON P.A. (Firm/Company)			
300 S. Duncan Ave., Suite 137 (Address)			
(Address)			
Clearwater (City/State and Zip Code)			
For further information concerning this matter, please call:			
James III I. Oalaan	707 074 0450		
at (727) 674-0453 trea Code & Daytime Telephone Number)		
Enclosed is a \$35.00 check made payable to the Department of	State.		
Mailing Adduser.	Carrad Addison		
Mailing Address: Amendment Section	Street Address: Amendment Section		
Division of Corporations	Division of Corporations		
P.O. Box 6327	Clifton Building		
Tallahassee, FL 32314	2661 Executive Center Circle		
	Tallahassee, FL 32301		

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

Pursuant to the provisions of sections 607.0502, 617.0502, statement of change is submitted for a corporation organization order to change its registered office or registered.	ed under the laws of the State of FLORIDA
1. The name of the corporation: CONLEY, MALLEY &	k GOLSON, P.A.
2. The principal office address: 300 South Duncan Av	venue, Suite 137, Clearwater, FL 33755
3. The mailing address (if different):	
4. Date of incorporation/qualification: 03/27/08	Document number: P08000031707
5. The name and street address of the current registered age Florida Department of State: (If resigned, enter resigned)	-
Jerrold J. Golson	
1230 South Myrtle Avenue, Suite	105
Clearwater, FL 33756	PR 08
6. The name and street address of the new registered agent (if changed):	(if changed) and /or registered office
300 South Duncan Avenue, Suite	137
(P.O. Box NOT acceptable)	
Clearwater, FL 33755	
The street address of its registered office and the street as changed will be identical.	ddress of the business office of its registered agent,
Such change was authorized by resolution duly adopted authorized by the board or the corporation has been noti	
(Signature of an officer or director)	Jerrold J. Golson (Printed or typed name and title)
I hereby accept the appointment as registered agent and I further agree to comply with the provisions of all statut of my duties, and I am familiar with and accept the oblig document is being filed marely to reflect a change in the corporation has been notified in writing of this change.	agree to act in this capacity. es relative to the proper and complete performance ation of my position as registered agent. Or, if this registered office address, I hereby confirm that the
(Signature of Registered Agent)	10/07/08 (Date)
If signing on behalf of an entity:	(isate)
(Typed or Printed Name)	

Make Checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 CR2E045 (8/05)

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