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Examiner's Initials

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

	1. (Corporation Name)				(Document #)			-
	2. (Corporation Name)							
	3(Corporation N				Document #)			
			Name)		Document #)			
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	NEW FILINGS		AMEND Amendmen	MENTS t			TALLA	97 J
	NonProfit Limited Liability	_	+	of R.A., Officer/Di Registered Agent	rector		ETARY	FIL AN 24
	Domestication			Withdrawal		SH 1/20	OF ST	PE D
	Other] [_	Merger	<u> </u>		090	A I E	· ວັ
	OTHER FILINGS		61 1504 A P. Barrella . W	STRATION/ IFICATION		5H/30		
-	Fictitious Name		Foreign					
	Name Reservation	- 	Limited Par	rtnership				
			Reinstatem	cnt	[
			Trademark					
			Other					

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

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

	provisions of sections 607.0502 poration organized under the law	, 617.0502, 607.1508, or 617.1508 is of the State ofFLORIDA	3, Florida Statutes, the			
	owing statement in order to chan	ge its registered office or registere	d agent, or both, in the			
		Inland Enterprises, Inc				
2. The mailing a	ddress of the corporation is:	5584 Timuquana Road				
		Jacksonville, FL 32210				
3. Date of incorp 4. The name and	poration/qualification: <u>Januar</u> I address of the current registered	y 10, 1997Document number: i agent and office:	P97000002841			
	Filings, Inc.		LAH!			
	3732 N.W. 16th Stre	eet	SSE ASSE			
	Ft. Lauderdale, FL	33311	EEFFL			
5. The name and	d address of the new registered ag	gent and office: (P.O. Box Not Acc	eptable : O			
	David D. Lutgens					
	5584 Timuquana Road	1				
	Jacksonville, FL 3	32210				
The street addre	ess of its registered office and the ed, will be identical.	street address of the business office	e of its registered			
Such change was	as authorized by resolution duly a	dopted by its board of directors or				
(Signature of an off	icer, chairman or vice chairman of the bo	January 21, 1 Dard) (Date)	997			
_David I	Lutgens, Director	, , ,				
**		r typed name and title)				
I hereby accept comply with the and I am famili	med as registered agent and to a the appointment as registered ag provisions of all statutes relative ar with and aggrept the obligation	scept service of process for the abovent and agree to act in this capacite to the proper and complete performs of my position as registered agent	ove stated corporation, ty. I further agree to mance of my duties,			
(Signature	of Registered Agent)	January 21, 1	997			
If signing on be	ehalf of an entity:	·				
David D. I	Lutgens Printed Name)	Director (Capacity)				
CR2E045(1/95)		FILING FEE: \$35.00				