255517

| (Requestor's Name) (Address) (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) |
|---|
| (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) |
| (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) |
| (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) |
| (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) |
| (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) |
| PICK-UP WAIT MAIL (Business Entity Name) |
| PICK-UP WAIT MAIL (Business Entity Name) |
| (Business Entity Name) |
| (Business Entity Name) |
| (Business Entity Name) |
| |
| |
| (Document Number) . |
| (Document Number) |
| |
| |
| Certified Copies Certificates of Status <u>6</u> |
| Setunda doples : Octanoates di Ctatas : |
| |
| Special Instructions to Filing Officer: |
| |
| |
| |
| , |
| |
| |
| |
| |

Office Use Only



800158340078

07/13/09--01074--006 **35.00

SECRETARY OF STATE TALLAHASSEE, FLORIDA

R.A.

TB JUL 16 2009

COVER LETTER

| | ent Section of Corporations | | | | | |
|--|---|---|------------------------|--|--|--|
| SUBJECT: | Volusiá Penny Name of | ysaver, Inc. Corporation | <u>-</u> | | | |
| DOCUMENT N | UMBER: | 255517 | | | | |
| The enclosed Stat | ement of Change of Registered Offi | ice/Agent and fee are submitted | for filing. | | | |
| Please return all correspondence concerning this matter to the following: | | | | | | |
| | • | | | | | |
| | Rutledo | ge R. Liles | | | | |
| | Name of C | ge R. Liles ontact Person | | | | |
| | | | | | | |
| Liles, Gavin, Costantino & George | | | | | | |
| | Firm/C | Company | | | | |
| | 005.147.4 | 4.00 14. 4500 | | | | |
| 225 Water Street, Suite 1500 Address | | | | | | |
| | | | | | | |
| | lackeonvii | le El 32202 | | | | |
| Jacksonville, FL 32202 City/State and Zip Code | | | | | | |
| | | | | | | |
| rliles@lgcglaw.com E-mail address: (to be used for future annual report notification) | | | | | | |
| | E man address (to be ased for | Tutul unit unit report notifica | | | | |
| For further information concerning this matter, please call: | | | | | | |
| | Rutledge Liles | at (904) | 624 1100 | | | |
| Na | ame of Contact Person | at (<u>904</u>) 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 Secti Division of Corpo Clifton Building 2661 Executive C Tallahassee, FL 3 | orations Center Circle | | | |

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

| statement of cha | provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Stange is submitted for a corporation organized under the laws of the State of $\frac{F}{I}$ or to change its registered office or registered agent, or both, in the State of Fla | lorida | his | _ |
|--|---|----------------------------------|-----------------------------|---------------------|
| | the corporation: Volusia Pennysaver, Inc. | | | |
| 2. The principal | office address: 901 Sixth Street, Daytona Beach, FL 32117 | | | |
| 3. The mailing a | ddress (if different): | | | |
| 4. Date of incorp | poration/qualification:2/28/62Document number: | 2555 | 517 | |
| | d street address of the current registered agent and registered office on file with tment of State: (If resigned, enter resigned) | the | | |
| | PALMETTO CHARTER SERVICES, INC. | | | |
| | 150 Magnolia Avenue | IALI SE | 2009 | |
| | Daytona Beach, FL 32114 | CRETAR' | 1 JUL 6002 | T |
| 6. The name and street address of the new registered agent (if changed) and /or registered offic (if changed): | | | 3 AM | LED |
| | Rutledge R. Liles | ORIC | <u>.</u> | |
| | Liles, Gavin, Costantino & George P.O Box NOT acceptable | A. | 9 | |
| | 225 Water Street, Suite 1500, Jacksonville, FL 32202 | | | |
| The street addr | ess of its registered office and the street address of the business office of its be identical. | registe | red age | ent, |
| | as authorized by resolution duly adopted by its board of directors or by an one board of the corporation has been notified in writing of the change. | | | |
| authorized by t | James W. Hopson, R | | | |
| / /// \ / | re of an officer or director Printed or typed name and titl | | <u> </u> | _ |
| Intereby accept I further agree of my duties, as document is be corporation ha | t the appointment as registered agent and agree to act in this capacity, to comply with the provisions of all statutes relative to the proper and com and I am familiar with and accept the obligation of my position as registered in fleet metely to relief a change in the registered office address, I hereby some and in writing of this change. | plete pe l agent. y confir | erforma Or, if m that | ince this the |
| | gnature of Registered Ageh | _ | | |
| If signing on b | ehalf of an entity: | | | |
| | Evned or Printed Name | | | |

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