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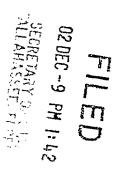
| (Requestor's Name) |
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| PICK-UP WAIT MAIL |
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| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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TRANSMITTAL LETTER

| TO: Amendment Section Division of Corporations | | |
|---|------------------|--|
| SUBJECT: R.J. Realty, Inc. | | |
| (Name of Corporation) | | |
| DOCUMENT NUMBER: | | |
| The enclosed Statement of Change of Registered Office/Agent and for filing. Please return all correspondence concerning this matter | | |
| Michelle Rowbottom (Name of person) | | |
| Raymond James Financial, Inc Legal Department (Name of firm/company) | | |
| P. O. Box 12749 (Address) | _ | |
| St. Petersburg, FL 33733-2749 (City/state and zip code) | | |
| For further information concerning this matter, please call: | | |
| Michelle Rowbottom at (727) 567-5189 (Name of person) (Area code & daytime t | elephone number) | |
| Enclosed is a \$35.00 check made payable to the Department of Sta | te. | |
| Mailing Address:Street Address:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP. O. Box 6327409 E. Gaines StreetTallahassee, FL 32314Tallahassee, 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: | R.J. Realty, Inc. | | |
|-------------------------|---|--|--|--|
| 2. | The principal office address: | 880 Carillon Parkway, P. O. Box 12749. | | |
| | St. Petersburg, FL 33716 | | | |
| 3. | The mailing address (if different): | | | |
| 4. | Date of incorporation/qualification: | 09/15/1978 Document number: \$86545 | | |
| 5. | The name and street address of the current registered agent and registered officers | | | |
| ٥, | | | | |
| | file with the Florida Department of State: | | | |
| | 880 Carillon Parkway | ණ <u>ි 1</u> | | |
| | St. Petersburg, FL 33716 | | | |
| _ | The manager of the s | - w registered agent (if shanged and/or registered | | |
| о. | 6. The name and street address of the new registered agent (if changed and/or registered | | | |
| | office (if changed): | 유 | | |
| | | | | |
| | 880 Carillon Parkway | | | |
| | St. Petersburg, FL 33716 | . <u> </u> | | |
| Such char so authori | nge was authorized by resolution duly ized by the board, or the corporation has | adopted by its board of directors or by an officer as been notified in wiring of the change. | | |
| Jum | an officer, chairman of vice chairman of the board) | Lynn Pippenger, Secretary | | |
| (Signature of | an officer, chairman of vice chairman of the board) | (Printed or typed name and title) | | |
| agree to o | comply with the provisions of all statut nce of my duties, and I am familiar wit d agent. Or, if this document is being j | gent and agree to act in this capacity. I further es relative to the proper and complete h and accept the obligation of my position as filed merely to reflect a change in the registered ation has been notified in writing of this change. | | |
| | | 111100 | | |
| (Signatur | e of Registered Agent) | (Date) | | |
| If signing | on behalf of an entity: | | | |
| | - | | | |
| | L. L. Matecki r Printed Name) | (Capacity) | | |

* * FILING FEE: \$35.00 * * *