

669910

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

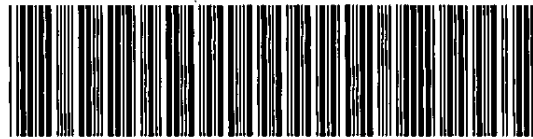
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

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300102692953

RA
Change

05/25/07--01016--015 **35.00

FILED

2007 MAY 25 PM 4:20

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

NOTIFIED
TO ACKNOWLEDGE
SUFFICIENCY OF FILING

2007 MAY 25 AM 11:31

RECEIVED
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

DOE
5/25/07

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

V-GPO, Inc.

Signature

Requested by:

SP/RW

Name

5/25/07

Date

10:14

Time

Walk-In

Will Pick Up

Art of Inc. File

LTD Partnership File

Foreign Corp. File

L.C. File

Fictitious Name File

Trade/Service Mark

Merger File

Art. of Amend. File

✓ RA Resignation Change

Dissolution / Withdrawal

Annual Report / Reinstatement

Cert. Copy

✓ Photo Copy

Certificate of Good Standing

Certificate of Status

Certificate of Fictitious Name

Corp Record Search

Officer Search

Fictitious Search

Fictitious Owner Search

Vehicle Search

Driving Record

UCC 1 or 3 File

UCC 11 Search

UCC 11 Retrieval

Courier

**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: V-GPO, Inc.
2. The principal office address: 2150 Whitfield Industrial Way
Sarasota, FL 34243
3. The mailing address (if different): _____

4. Date of incorporation/qualification: 05/13/1980 Document number: 669910

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

Your Capital Connection, Inc.

417 E. Virginia St, Suite 1

Tallahassee, FL 32302

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Your Capital Connection, Inc.

417 E. Virginia St, Suite 1

(P.O. Box NOT acceptable)

Tallahassee, FL 32302

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

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.

(Signature of an officer or director)

Norman R. Dobiesz, Chairman/Director

(Printed or typed name and title)

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 performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

Stacey Piland
(Signature of Registered Agent)

5/25/07
(Date)

If signing on behalf of an entity:

Stacey Piland for Capital Connection, Inc.
(Typed or Printed 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)

FILED
2007 MAY 25 PM 4:21
SECRETARY OF STATE
TALLAHASSEE, FLORIDA