F00000000846

Address City/State/Zip Phone #

Office Use Only

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☐ Walk in ☐ Pick up time ☐ Mail out ☐ Will wait	Photocopy	Certified Copy Certificate of Status
NEW FILINGS Profit Not for Profit Limited Liability Domestication Other	AMENDMENTS Amendment Resignation of R.A Change of Registers Dissolution/Withdra Merger	ed Agent
OTHER FILINGS	REGISTRATION/QUA	ALIFICATION
Annual Report Fictitious Name	☐ Foreign ☐ Limited Partnership ☐ Reinstatement ☐ Trademark ☐ Other	

Examiner's Initials

TATEMENT 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, the undersigned corporation organized under the laws of the State of
1. The name of the corporation is: LIBERTY ENTERAL PRODUCTS CORPORATION
2. The mailing address of the corporation is: 10045 S. FEDERAL HIGHWAY, PORT ST. LUCIE, FL 34952
3. Date of incorporation/qualification: 2/15/2000 Document number: F00000000846
4. The name and address of the current registered agent and office:
TROWBRIDGE, KEITH
3595 SW CORPORATE PKWY PALM CITY, FL 34900 5. The name and address of the new registered agent and office: (P. O. Box Not Acceptable): 2
PALM CITY, FL 34900
The state of the s
ROBERT N. KLEIN C/O DEAN, MEAD, MINTON & KLEIN
C/O DEAN, MEAD, MINTON & KLEIN 1903 S. 25TH STREET, SUITE 200
FORT PIERCE, FL 34947
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.
JULY 14, 2000
(Signature of an officer, chairman or vice chairman of the board) (Date)
WARREN K. TROWBRIDGE, PRESIDENT
(Printed or typed name and title)
Having been named as registered agent and to accept service of process for the above stated corporation, 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.
Robert VI. Oli JULY 18, 2000
(Signature of Registered Agent) (Date)
If signing on behalf of an entity:
(Typed or Printed Name) (Capacity)
* * * FIT INC FFF • \$35.00 * * *

CR2E045(7/97)

DIVISION OF CORPORATIONS P.

TALLAHASSEE, FL 32314