# F00000003889

(Re	questor's Name)			
(Ad	dress)			
(Address)				
(City/State/Zip/Phone #)				
PICK-UP	☐ WAIT	MAIL.		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				

Office Use Only



100049341611



03/31/05--01020--006 \*\*35.00



### PARANET CORPORATION SERVICES, INC.

3761 Venture Drive Suite 260 Duluth, Georgia 30096 800-277-9977 / Fax 800-815-0477

March 30, 2005

#### FILING TRANSMITTAL LETTER

Secretary of State Amendment Section 409 E. Gaines Street Tallahassee, FL 32399

Phone: 850-488-9000

RE: EZZELL, INC.

Dear Filing Officer:

Please find the enclosed:

- 1. Two (2) copies of change of Registered Agent/Office for the above entity;
- 2. Our check in the amount of \$35.00 to cover the filing fee; and
- 3. Self-addressed envelope for return of evidence.

If you have any questions, or require anything further, please contact me toll free at 1-800-277-9977. Thank you for your assistance.

Very truly yours,

Stephanie Thomas

Paranet Job No. 05-03-0464

#### TRANSMITTAL LETTER

Division of Corporations
SUBJECT: EZZELL, INC. doing business in Florida as EZZELL, INC. of GEORGIA (Name of corporation)
DOCUMENT NUMBER: F00000003889
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
SEPHANIZ THOMAS
(Name of person)
Paranet Corporation Services, Inc.
(Name of firm/company)
3761 Venture Drive, Suite 260
(Address)
Duluth, GA 30096 (City/state and zip code)
For further information concerning this matter, please call:
STEPHANIE THOMAS  at (800) 277-9977  (Name of person) (Area code & daytime telephone number)
(Name of person) (Area code & daytime telephone number)
Enclosed is a \$35.00 check made payable to the Department of State.
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 p	provisions of sections 607.0502, 617.0502,	607.1508, or 617.1508, Florida Statutes, th	is statement of
change is submi	tted for a corporation organized under the i	laws of the State of Georgia	in order
to change its reg	ristered office or registered agent, or both, i	n the State of Florida.	
1. The name of t	he corporation: EZZELL, INC. doing bus	siness in Florida as EZZELL, INC. of GI	EORGIA
2. The principal	office address: 1109 E. Second Avenue, I	Rome, GA 30161	 - <u></u>
		<u> </u>	
3. The mailing a	ddress (if different): P.O. BOX 5633, Ron	ne, GA 30162-5633	
4. Date of incorp	poration/qualification: 7-11-00	Document number: F00000003889	
	street address of the current registered ager tment of State:	nt and registered office on file with the	05 HR 31 PH 2: W
	CT Corporation System_		
	1200 South Pine Island Road		記る「
	Plantation, FL 33324	<u> </u>	Ag 5
6. The name and (if changed):	street address of the new registered agent (	if changed) and /or registered office	
	NRAI Services, Inc.		
	2731 Executive Park Drive, Suite 4	. <del></del>	
	(P.O. Box or personal mail	box NOT acceptable)	
	Weston, FL 33331		
The street addre changed will be	ss of its registered office and the street ad identical.	dress of the business office of its registere	ed agent, as
Such change wa	s authorized by resolution duly adopted b corporation has been notified in writing of	y its board of directors or by an officer so of the change.	authorized by
(in	ignature of an officer or director)	Anthony M. Ezzell, President	
I hereby accept I further agree t duties, and I am being filed mere been nofified in	the appointment as registered agent and a o comply with the provisions of all statute familiar with and accept the obligation o ly to reflect a change in the registered off writing of this change	agree to act in this capacity. Is relative to the proper and complete perform for position as registered agent. Or, if the confirm that the confirmation	
NRAI Services, by:	114 1- H. C	3-23-05	
$-\mathcal{O}_{ \mathcal{T} }$	Signature of Registered Agent)	(Date)	
If signing on bel	aall of an entity	,	
Jeff M. Higdon	21/1.11/6	Special Assistant Secretary	
	(Types of Printed Name)	(Capacity)	