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2525 V	CRAIN & SON VINFORD AVILLE, TN 3	E		
(Address)				
(Address)				
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(City/State/Zip/Phone #)				
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	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	•	· · · · · · · · · · · · · · · · · · ·	
in order to change its registered office of	or registered agent, or both, in the State of .	Florida.	
1. The name of the corporation:			
2. The principal office address: 2525 Winford Ave	enue Neshville TN 37211		
		E R T	
3. The mailing address (if different):		23 VRV SSE	
		L S L	
4. Date of incorporation/qualification: 2/10/2003	Document number: F0300	00000683 - 0	
The name and street address of the current regi Florida Department of State;	istered agent and registered office on file w	rith the Dr. 5.	
CT Corporation System		_	
1200 South Pine Island R	Road	_	
Plantation, FL 33324	***		
	e de la companya de		
2731 Executive Park I	Drive, Suite 4		
(P.O. Box NOT acceptable)			
Weston, FL 33331		_	
The street address of its registered office and the as changed will be identical.			
Such change was authorized by resolution duly authorized by the board, or the corporation has	adopted by its board of directors or by ar been notified in writing of the change.	1 officer so	
(Signature of an other or director)	James H. Ped	190, Sec-Treas	
Thereby accept the appointment as registered a I further agree to comply with the provisions of of my duties, and I am familiar with and accept document is being filed merely to reflect a chan corporation has been polified in writing of this is	gent and agree to act in this capacity, all statutes relative to the proper and cor the obligation of my position as registere ge in the registered office address, I here change.	nplete performance ed agent. Or, if this by confirm that the	
	3/15/0	<u> </u>	
(Significate of Registered Agent)	(Date)		
If signing on behalf of an entity:	Secretion Secretion		
James Bordonaro for NRAI (Typed or Printed Name)	SISTANT SECTED S		
	NG 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)