## F030000003165

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T.Smith APR 2 6 2005

## TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations				
SUBJECT: Affordable Dentures Dental Laboratories, Inc, (Name of corporation)				
DOCUMENT NUMBER: F03000002165				
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:				
Stephanie Thomas				
(Name of person)				
Paranet Corporation Services, Inc.				
(Name of firm/company)				
3761 Venture Drive, Suite 260 (Address)				
(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)				
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

change is submi	=	0502, 607.1508, or 617.1508, Florida Statutes, the the laws of the State of North Carolina both, in the State of Florida.	his statement of in order
	the corporation: Affordable Dentur		·
	office address: 4990 Highway 70 V		
3. The mailing a	address (if different): n/a		
4. Date of incor	poration/qualification: 01/02/90	Document number: n/a	
	d street address of the current registere rtment of State:	ed agent and registered office on file with the	
	CT Corporation System		25 O
	1200 South Pine Island Road		
	Plantation, FL 33324		APR 20 CRETARY AHASSET
6. The name and (if changed):	·	agent (if changed) and /or registered office	PH 3: 38
	NRAI Services, Inc.		
	2731 Executive Park Drive, Sui (P.O. Box or perso	onal mailbox NOT acceptable)	•
	Weston, FL 33331		
The street addr changed will be	ess of its registered office and the street identical.	reet address of the business office of its register	red agent, as
Such change w the board, or th	as authorized by resolution duly ado le comporation has been notified in w	pted by its board of directors or by an officer s riting of the change.	o authorized by
Luer	Signature of an officer or director)	Karen Franklin, Exec. Asst. Se	ecy.
veen notifiea in	i writing of this change.	t and agree to act in this capacity. statutes relative to the proper and complete per ation of my position as registered agent. Or, if red office address, I hereby confirm that the co	rformance of my this document is rporation has
NRAI Services	In Hotel	4/11/05	
	(Signature of Registered Agent)	(Date)	
	ehalf of an entity:		•
Mikel Hutchin	ngs (Typed or Printed Name)	Special Asst. Secy. (Capacity)	· · · · · · · · · · · · · · · · · · ·

\* \* \* FILING FEE: \$35.00 \* \* \*