

F030000006317

Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850) 617-6380

From: Account Name : C T CORPORATION S
Account Number : FCA000000023
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RE-SUBMIT

Please retain original filing
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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

REGISTERED AGENT CHANGE
OGLETREE, DEAKINS, NASH, SMOAK & STEWART, P.C.

Certificate of Status	0
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Corporate Filing Menu

Help



April 16, 2010

FLORIDA DEPARTMENT OF STATE

OGLETREE, DEAKINS, NASH, SMOAK & STEWART, P.C.
P.O. BOX 167
GREENVILLE, SC 29602

SUBJECT: OGLETREE, DEAKINS, NASH, SMOAK & STEWART, P.C.
REF: F03000006317

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

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Tina Roberts
Regulatory Specialist II

FAX Aud. #: E10000086631
Letter Number: 710A00009390

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TALLAHASSEE, FLORIDA

**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 South Carolina _____ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Ogletree, Deakins, Nash, Smoak & Stewart, P.C.
2. The principal office address: 300 North Main Street, Greenville, SC 29601
3. The mailing address (if different): P.O. Box 167, Greenville, SC 29602
4. Date of incorporation/qualification: 12/15/2003 Document number: FD3 000006317
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

David M. Demajo

701 Brickell Avenue

Miami, FL 33131

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

C T Corporation System

c/o C T Corporation System, 1200 South Pine Island Road

P.O. Box NOT acceptable

Plantation, Florida 33324

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.

Joel A. Daniel
Signature of an officer or director

Joel A. Daniel, Secretary
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.

By: C T Corporation System
Dan H. Morris
Signature of Registered Agent

4/5/10
Date

If signing on behalf of an entity:
DALL W. MORRIS
ASSISTANT VICE PRESIDENT
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
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