## F040000/3/

(Re	equestor's Name)	
(Ac	ddress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Bu	usiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



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SECRETARY OF STATE TALLAHASSEE, FLORIDA

F

## **COVER LETTER**

Amendment Section Division of Corporations

TO:

SUBJECT: Hinson Communications, Inc. (Name of Corporation)
(.vanc or cosporation)
DOCUMENT NUMBER: F04000000131
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:
A section of the sect
EDDY OR LINDA HINSON
(Name of Contact Person)
HINSON COMMUNICATIONS, INC.
(Firm/Company)
1314 ROSS CLARK CIRCLE (Address)
DOTHAN, AL 36301 (City/State and Zip Code)
For further information concerning this matter, please call:
EDDY OR LINDA HINSON at ( 334 ) 793-1896 (Area Code & Daytime Telephone Number)
Enclosed is a \$35.00 check made payable to the Department of State.
Mailing Address: Amendment Section Division of Corporations Division of Corporations

Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

P.O. Box 6327

Tallahassee, FL 32314

## 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 Statute. statement of change is submitted for a corporation organized under the laws of the State of in order to change its registered office or registered agent, or both, in the State of Florida.	bama	
1. The name of the corporation: Hinson Communications, Inc.		
2. The principal office address: 1314 ROSS CLARK CIRCLE		
DOTHAN, AL 36301		
3. The mailing address (if different):		
4. Date of incorporation/qualification: 1/2/2004 Document number: F040000001	31	
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:		
CT Corporation System		
1200 South Pine Island Road		
Plantation, FL 33324	2008-1	en <del>al</del> g
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):	% 29 of TAR)	
Pacific Registered Agents, Inc.	유를	<b>!</b>
92 Sadberry Road	AM II: HO	•
(P.O. Box NOT acceptable)  Quincy, FL 32351		
The street address of its registered office and the street address of the business office of its registas changed will be identical.	stered agent,	ı
Such change was authorized by resolution duly adopted by its board of directors or by an office authorized by the board, or the corporation has been notified in writing of the change.	r so	
(Signature of an officer or director)  (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 of my duties, and I am familiar with and accept the obligation of my position as registered agent document is being filed merely to reflect a change in the registered office address, I hereby concorporation has been notified in writing of this change.	performance it. Or, if this firm that the	e \$ ?
(Signature of Registered Agent) (Date)		
If signing on behalf of an entity:		
Charles F. Mathias, President  (Typed or Printed Name)		

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (8/05)

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