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APR 28 2014 C. CARRUIMERS

COVER LETTER

TO:

Amendment Section Division of Corporations

SUBJECT: Downes Associates, Inc.

Name of Corporation

DOCUMENT NUMBER: FU4

-04000006599

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:

Sheryll Harrold

Name of Contact Person

Downes Associates, Inc.

Firm/Company

2129 Northwood Drive

Address

Salisbury, MD 21801

City/State and Zip Code

sharrold@downesassociates.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Sheryll Harrold

, 410

546-4422

Name of Contact Person

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
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this ange is submitted for a corporation organized under the laws of the State of Maryland
	er to change its registered office or registered agent, or both, in the State of Florida.
1. The name of	the corporation: Downes Associates, Inc.
2. The principal	office address: 2129 Northwood Drive, Salisbury, MD 21801
3. The mailing a	address (if different): same as above
4. Date of incor	poration/qualification: April 25, 1974 Document number: F0400006599
	d street address of the current registered agent and registered office on file with the rtment of State: (If resigned, enter resigned)
	Terry L. Weaver
	12704 Aston Oaks Drive
	Fort Myers, FL 33912
6. The name and (if changed):	I street address of the new registered agent (if changed) and /or registered office
	United Corporate Services, Inc.
	9200 South Dadeland Blvd, Suite 508
	P.O. Box NOT acceptable Miami, FL 33156
as changed will	
Such change we authorized by the	as authorized by resolution duly adopted by its board of directors or by an officer so see board, or the corporation has been notified in writing of the change.
ZKO Signyhu	George E. Owens, President Printed or typed name and title
periormance of	the appointment as registered agent and agree to act in this capacity. to comply with the provisions of all statutes relative to the proper and complete my duties, and I am familiar with and accept the obligation of my position as registered is document is being filed merely to reflect a change in the registered office address, I that the carporation/has been notified in writing of this change
Musign	MJ. Sulanly 4/16/2014 nature of Registered Agent Date
If signing on bel	half of an entity:
KOBEK	TF. GILHUDIEY- VICE TRES DENI

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