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## **COVER LETTER**

TO: Amendment Section Division of Corporations					
SUBJECT: Pediatric Endocrinology Nursing Society					
	(Name of Co	rporation)			
DOCUMENT NUMBER: F05000000097					
The enclosed State	ment of Change of Registered Office	Agent and fee are submitted for filing.			
Please return all co	prrespondence concerning this matter	to the following:			
	Jon A. Dancy (Name of Con	toot Porcon)			
Ź	(Name of Con	lact Person)			
Pediatric Endocrinology Nursing Society					
•	(Firm/Con	mpany)			
	•				
7794 Grow Drive					
	(Addr	ess)			
Pensacola, FL 32514					
(City/State and Zip Code)					
For further inform	ation concerning this matter, please ca	all:			
Jon A. Dancy		at (850 ) 484-5223 (Area Code & Daytime Telephone Number)			
(Na	ame 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	Street Address: Amendment Section			
	Division of Corporations	Division of Corporations			
	P.O. Box 6327	Clifton Building			
	Tallahassee, FL 32314	2661 Executive Center Circle			
		Tallahassee, FL 32301			

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

Pursuant to the statement of cha	provisions of sections 607.0502, 617.0 ange is submitted for a corporation orger to change its registered office or registered corporation: Pediatric Endocrinology of Grow Drive, Pensional office address: 7794 Grow Drive, Pensions	502, 607.1508, or 617.1508 anized under the laws of th	8, Florida Statutes, this e State of Michigan
in orde	er to change its registered office or regi	istered agent, or both, in the	e State of Florida! / LED
1. The name of	the corporation: Pediatric Endocrinolog	gy Nursing Society	JUN 22
2. The principal	office address: 7794 Grow Drive, Pen	sacola, FL 32514	TAGETARY OF ST
3. The mailing a	address (if different):		SSEE FLORIDA
4. Date of incor	poration/qualification: 12/30/2004	Document number	F05000000097
	d street address of the current registered rtment of State:	l agent and registered office	on file with the
	Puetz, Belinda E.		
	7794 Grow Drive		<del>-</del>
	Pensacola, FL 32514		
6. The name and (if changed):	d street address of the new registered ag	gent (if changed) and /or reg	gistered office
	Jon A. Dancy		
	7794 Grow Drive		
	(P.O. Box NOT acceptal	ble)	
The street addre	ess of its registered office and the stre be identical.	et address of the business	office of its registered agent,
Such change we authorized by the	as authorized by resolution duly adop he board, or the corpolation has been	ted by its board of director notified in writing of the c	rs or by an officer so change.
Signati	ure of an officer or director)		hD, RN, Executive Director
I hereby accept I further agree i of my duties, document is bei corporation has	the appointment as registered agent to comply with the provisions of all st nd I am familiar with and accept the o ing filed merely to reflect a change in s been notified in writing of this chang	and agree to act in this ca atutes relative to the prop bligation of my position a the registered office addre ge.	pacity. er and complete performance s registered agent. Or, if this ess, I hereby confirm that the
100	A Canas	June 20, 2006	
•	ehalf of an entity.	(L	ate)
Jon A. Dancy	<del></del>		
Γ)	Typed or Printed Name)		

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