

F070000005316

**Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet**

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To:

Division of Corporations
Fax Number : (850) 617-6330

From:

Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (850) 222-1092
Fax Number : (850) 878-5358

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11 AUG 16 AM 9:55
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**REGISTERED AGENT CHANGE
VISIONARY DEVELOPMENT GROUP, INC.**

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$35.00

PA OK 8/24/11

COVER LETTER

**TO: Amendment Section
Division of Corporations**

SUBJECT: VISIONARY DEVELOPMENT GROUP, INC.
Name of Corporation

DOCUMENT NUMBER: F07000005315

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:

Name of Contact Person

Firm/Company

Address

City/State and Zip Code: _____

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

For further information concerning this matter, please call:

Name of Contact Person _____ at (_____) _____
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

CR2E045 (8/05)

**STATEMENT OF CHANGE OF REGISTERED OFFICE (OR REGISTERED AGENT OR BOTH
FOR CORPORATIONS)**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1509, or 617.1508, Florida Statutes, this
statement of change is submitted for a corporation organized under the laws of the State of Texas
in order to change its registered office or registered agent or both, in the State of Florida.

1. The name of the corporation: VISIONARY DEVELOPMENT GROUP, INC.
2. The principal office address: 1200 GOLDEN KEY CIRCLE SUITE 331
EL PASO TX 79925
3. The mailing address (if different): _____

4. Date of incorporation/qualification: 10/25/2007 Document number: F07000005316
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 Love
16411 SAPPHIRE PLACE
WESTON FL 33331 US

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.

[Signature] Michael B. Jones Vice President
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: [Signature] 6/22/11
Signature of Registered Agent Date

If signing on behalf of an entity:

Kimberly Baggett
Assistant Secretary
Typed or Printed Name

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6317, TALLAHASSEE, FL 32314

CR2B045 (8/05)