F08000001450

(Requestor's Name)	
(Address)	<u>.</u>
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT	MAIL
(Business Entity Name)	
(Document Number)	
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Special Instructions to Filing Officer:	

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			•	
N SERVICE COMPANY.	ACCOUNT NO.		07210000	0022
	REFERENCE		697384 i	\sim
	AUTHORIZATION		Sypte	Wellman
-	COST LIMIT	:	\$ 35 <i>U</i> \	/
ORDER DATE :	August 22, 2008			
ORDER TIME :	11:23 AM			
ORDER NO. :	697384-025			
CUSTOMER NO:	7122203			
	CHANGE OF A	GEN'	<u>T</u>	
NAME:	STAUBACH INVE INC.	STM	ENT SALES	;,
PLEASE RETURN	THE FOLLOWING AS	PR	OOF OF FI	LING:
	TIED COPY STAMPED COPY			
CONTACT PERSON	: Harrv B. Davi	s		

EXAMINER'S INITIALS:

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

statement of change i	s submitted for a corporation organize	607.1508, or 617.1508, Florida Statute. ed under the laws of the State of \underline{Texat} ed agent, or both, in the State of Florida	<u>s</u>
1. The name of the co	orporation: STAUBACH INVE	STMENT SALES, INC.	
	e address: 15601 Dallas Parkwa		
3. The mailing addres	ss (if different):		
4. Date of incorporati	ion/qualification: 03/27/2008	Document number: F08000001	450
5. The name and stree Florida Departmen		nt and registered office on file with the	
CT	Corporation System		
120	00 South Pine Island Road		
Pla	antation, FL 33324		S
6. The name and stree (if changed):	et address of the new registered agent ((if changed) and /or registered office	08 AUG 26
<u>Co</u>	rporation Service Company	SEE.	RY C
120	01 Hays Street		
T	(P.O. Box NOT acceptable)	RIC	12,2
	llahassee, FL 32301	»	•
The street address of as changed will be in	f its registered office and the street addentical.	ddress of the business office of its regis	stered agent,
Such change was au authorized by the bo	thorized by resolution duly adopted bard, or the corporation has been notif	by its board of directors or by an office fied in writing of the change.	er so
Muu (Signature of a	an officer or director)	Maureen Cullen, Attorney in (Printed or typed name and title)	Fact
I further agree to co of my duties, and I a document is being fi corporation has bee	appointment as registered agent and imply with the provisions of all statute in familiar with and accept the obligited merely to reflect a change in the innotified in writing of this change.	agree to act in this capacity. es relative to the proper and complete ation of my position as registered ager registered office address, I hereby con	performance nt. Or, if this firm that the
By: Willx	Service Company	08/18/2008 (Date)	
If signing on behalf	•	(·····)	
Amy Gudgel, A	ASST. VP		

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 * * *