(Re	questor's Name)		
(Ad	dress)	·	
(Ad	dress)		
(Cit	y/State/Zip/Phone	e #)	
PICK-UP	☐ WAIT	MAIL	
(Bu	siness Entity Nar	ne)	
. (00	cument Number)		
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DH SERVICE' COMPARY					
ACCOUNT NO. : 072100000032					
REFERENCE : 490421 4356344					
AUTHORIZATION Spellena					
COST LIMIT : \$35.00					
ORDER DATE: March 18, 2008					
ORDER TIME : 9:30 AM					
ORDER NO. : 490421-040					
CUSTOMER NO: 4356344					
, 					
CHANGE OF AGENT					
NAME: INTERCIT INC.					
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:					
CERTIFIED COPY XX PLAIN STAMPED COPY					
•					
CONTACT PERSON: Troy Todd					

EXAMINER'S INITIALS:

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

statement of cha	provisions of sections 607.0502, 617.0 ange is submitted for a corporation org er to change its registered office or regi	anized under the laws of the State of	Delaware
1. The name of	the corporation: INTERCIT, INC	(/•	
2. The principal	office address: 1585 South Tent	h Street, Safety Harbor, FL	34695
3. The mailing a	address (if different):		
4. Date of incorp	poration/qualification: 06/30/1993	Document number: F9300	00003015
	d street address of the current registered rtment of State:	agent and registered office on file wi	th the
	C T Corporation System		
	1200 South Pine Island Road	l	
	Plantation, FL 33324		10000000000000000000000000000000000000
6. The name and (if changed):	I street address of the new registered ag	ent (if changed) and /or registered off	FILEU 2008 MAR 21 PH 2: 11 SECRETARY OF STAT TALLAHASSEE, FLORI
	Corporation Service Compar	ny	FLOUR STA
	1201 Hays Street		ALL IS
	(P.O. Box NOT acceptal	ıle)	_
	Tallahassee, FL 32301		.
The street address changed will	ess of its registered office and the stree be identical.	et address of the business office of it	s registered agent,
Such change wa authorized by th	as authorized by resolution duly adopt ne board, or the corporation has been to	ed by its board of directors or by an notified in writing of the change.	officer so
Hatty (Signarhi	Le of an offiger or director)	Kathy L. Yetter, Attorney	<u></u>
I hereby accept I further agree t of my duties, an document is bei corporation has	the appointment as registered agent of comply with the provisions of all stand I am familiar with and accept the of the filed merely to reflect a change in the been notified in writing of this change.	· · · · · · · · · · · · · · · · · · ·	·
By: Me	tion Service Company Multiple Company Institute of Registered Agent)	,	20.08
	half of an entity:	(Date)	
Michelle R.	Vannoy, Asst. V.P.		
(T)	yped 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 * * *