F90000005893

(Re	equestor's Name)	_
(Ad	ldress)	
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(Cit	ty/State/Zip/Phone	, #)
PICK-UP	☐ WAIT	MAIL
. (Bu	siness Entity Nam	ne)
(Document Number)		
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DIVISIONE TARK COMPARATIONS

OF DEC -4 PM 3: 45

COVER LETTER

Division of Corporations	
SUBJECT: The Delta Paradigm Group, Incorporate	d
(Name of Corporatio	n)
DOCUMENT NUMBER: F96000005893	
The enclosed Statement of Change of Registered Office/Agent a	and fee are submitted for filing.
Please return all correspondence concerning this matter to the fo	
•	
Bruce R. Abernethy, Jr.	
(Name of Contact Pers	son)
Duise D. Ahamathii In D.A	
Bruce R. Abernethy, Jr., P.A. (Firm/Company)	
500 Virginia Avenue, Suite 202	
(Address)	
Fort Pierce, FL 34982 (City/State and Zip Co	ode)
For further information concerning this matter, please call:	
•	
Bruce R. Abernethy, Jr. at (7	72) 489-4901 rea Code & Daytime Telephone Number)
(Name of Contact Person) (A	rea 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
	Clifton Building
Tallahassee, FL 32314	2661 Executive Center Circle
To the Market of the Control of the	Tallahassee, FL 32301

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Delaware in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: The Petta Paradigm Group, Incorporated
2. The principal office address: 1680 S. E. 8th Avenue
Ollerchobee, FL 34974
3. The mailing address (if different): P.O. Box 6/0
OKeechobee, FL 34 973-0610
4. Date of incorporation/qualification: "//3/96 Document number: F9600005893
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
Bruce R. Abernethy, Jr.
Fort Pierce, FL 34982
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
MARY E- WICHARD
(P.O. Box NOT acceptable)
Unechobee, FL 34974
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 of an officer or director) CHARLES E. WICHARD 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.
Mary C. Mulard 11/27/06 (Signature of Registered Agent) 11/27/06
If signing on behalf of an entity:
(Typed or Printed Name)

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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

CR2E045 (8/05)