F97000006667

(Re	questor's Name)		
(Ad	dress)		
(Ad	dress)		
(Cit	y/State/Zip/Phone	e #)	
PICK-UP	WAIT	MAIL	
(Bu	siness Entity Nar	me)	
(Document Number)			
Certified Copies	_ Certificates	s of Status	
Special Instructions to	Filing Officer:		

Office Use Only



700108437317



O7 DEC 11 AM 11: 34 SECRETARY OF STATE TALLAHASSEE, FLORIC

APPROVED AND FILED

P.A. Chorse

G. Couffictio DEC 1 1 2007



· · · · · · · · · · · · · · · · · · ·
ACCOUNT NO. : 07210000032
REFERENCE : 997351 7113721
AUTHORIZATION: Spublemen
COST LIMIT : \$ 15.00
ORDER DATE : July 12, 2007
ORDER TIME : 10:07 AM
ORDER NO. : 997351-670
CUSTOMER NO: 7113721
CHANGE OF AGENT
NAME: SUNTRUST ROBINSON HUMPHREY, INC.
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
CERTIFIED COPY PLAIN STAMPED COPY
CONTACT PERSON: Joyce Markley

EXAMINER'S INITIALS:

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this ange is submitted for a corporation organized under the laws of the State of $\overline{\text{Tennessee}}$ are to change its registered office or registered agent, or both, in the State of Florida.	:
1. The name of	the corporation: SUNTRUST ROBINSON HUMPHREY, INC.	
2. The principal	office address: 303 Peachtree Street NE 24th Floor	
Atlanta, (GA 30308	
	address (if different): 303 Peachtree Street NE 36th Floor (Tina Lewis) GA 30308	
4. Date of incorp	poration/qualification: 12/17/1997 Document number: F9700000667	
	d street address of the current registered agent and registered office on file with the rtment of State:	
	Cathy H Arther	
	200 S Orange Ave. 9th Floor Mail Code 1093	a 0
	Orlando, FL 32801	E E
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered office	CII AM
	Corporation Service Company	MIN 3
	1201 Hays Street	33 33 33
	(P.O. Box NOT acceptable)	3-
	Tallahassee, FL 32301	
The street address changed will	ess of its registered office and the street address of the business office of its registered at the identical.	agent,
Such change was authorized by the	as authorized by resolution duly adopted by its board of directors or by an officer so he board, or the corporation has been notified in writing of the change.	
OU (Signation	ure of an officer or director) TINA LEWIS - ASST. CORP. SEC. (Printed or typed name and title)	
I further agree of my duties, an document is bei corporation has	t the appointment as registered agent and agree to act in this capacity. to comply with the provisions of all statutes relative to the proper and complete perfor, nd I am familiar with and accept the obligation of my position as registered agent. Or, ing filed merely to reflect a change in the registered office address, I hereby confirm th s been notified in writing of this change. tion Service Company	mance if this at the
By:	loù Juppet 12/10/2007	
10	gnature of Registered/Agent) (Date)	
If signing on be	chalf of an entity:	,
	ppet, Asst. Vice President Typed or Printed Name)	
	* * * FILING FEE: \$35.00 * * *	

Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314