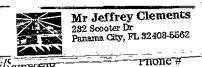
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Examiner's Initials

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. (Corporation Name)	= (Document #)	TAS 8
2(Corporation Name)	(Document #)	OCT 12
3. (Corporation Name)	(Document #)	MIO: 58 SEE PLORID
4(Corporation Name)	(Document #)	₽
☐ Walk in ☐ Pick up time		Certified Copy
Mail out Will wait	Photocopy	Certificate of Status
NEW FILINGS	<u>AMENDMENTS</u>	<u>.</u>
☐ Profit ☐ Not for Profit ☐ Limited Liability ☐ Domestication ☐ Other	☐ Amendment ☐ Resignation of R ☐ Change of Regis ☐ Dissolution/With ☐ Merger	
OTHER FILINGS	REGISTRATION/C	<u>OUALIFICATION</u>
☐ Annual Report ☐ Fictitious Name	☐ Foreign ☐ Limited Partners ☐ Reinstatement ☐ Trademark	
	Other	T BROWN OCT

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,		
the undersigned corporation organized under the laws of the State of Florida submits the following statement in order to change its registered office or registered agent, or both, in		
the State of Florida.		
1. The name of the corporation: Henson Delivery Service, Inc.		
2. The mailing address of the corporation: 111 Queens Circles		
Parama City FL 32405		
3. Date of incorporation/qualification:03/27/84 Document number: 693344		
4. The name and address of the current registered agent and office:		
Thomas J. Henson		
111 Queens Circle		
Parana City, FL 32405		
5. The name and address of the new registered agent (if changed) and/or registered office (if changed) (P. O. Box Not Acceptable)		
Tanny Clements, President		
232 Scoter Drive		
Panana City Reach, FL 32408		
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.		
(Signature of an office), chairman or vice chairman of the board) (Date)		
Printed or typed name and title)		
Having been named as registered agent and to accept service of process for the above stated corporation, 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.		
Community Provident 10/4/00 (Signature of Registered Agent)		
f signing on behalf of an entity:		
(Typed or Printed Name) (Capacity)		
4 4 PH TRIC PER 047 00 4 4 4		
* * * FILING FEE: \$35.00 * * *		