595164

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

Office Use Only



600263386446

08/18/14--01041--018 **35.00

SECRETARY DE STATE
TALL BUG 18 PH 12: 45

'AUG 22 2014 T. CARTER

COVER LETTER

TO: Amendme Division o	ent Section of Corporations		
SUBJECT:	ZIMMER	INVESTMENTS, Name of Corporation	Inc.
DOCUMENT NO	JMBER: J951	64	
The enclosed State	ement of Change of Regis	stered Office/Agent and fe	e are submitted for filing.
Please return all c	orrespondence concerning	g this matter to the followi	ng:
	BRUCE J	BRODFUHRER Name of Contact Person	
	ZIMMER	ENVESTMENTS, Firm/Company	Inc.
_	1415 7	Iusca Trail	
		1 lddi obb	
	WINTER	SPRINGS, FL City/State and Zip Code	32708
-	E-mail address: (to be	308 C Yahoo. Colused for future annual re	eport notification)
For further inform	nation concerning this mat	tter, please call:	
BRUCE	J. BRODFUHRE	e at (407	3 14 - 7231 de & Daytime Telephone Number
Na	me of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a \$35.	00 check made payable to	the Department of State.	
	Mailing Address: Amendment Secti	on Stree	et Address: endment Section

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

CR2E045 (03/12)

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 Florida
in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: Zimmer Investments, Inc.
2. The principal office address: 1415 Tusca Trail
Winter Springs, FL 32708
3. The mailing address (if different):
4. Date of incorporation/qualification: 9/29/1987 Document number: 795/64
5. The name and street address of the current registered agent and registered office on file with the
Florida Department of State: (If resigned, enter resigned)
Bruce J. Brodfuhrer
10 Windsormere Way Suite 100
Oviedo, FL 32765
6. The name and street address of the navy resistant agent (if shanged) and (or resistant office.
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Brucs J. Brodfuhrer
1415 Tusca Trail P.O. Box NOT acceptable
Winter Springs, FL 32708
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 of the corporation has been notified in writing of the change.
Bruce J. Brodfuhrer Director 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
performance of my auties, and I am familiar with and accept the obtigation 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.
Signature of Harristered Agent 8/15/2014 Date
Signature of Registered Agent Date
If signing on behalf of an entity:
Typed or Printed Name

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