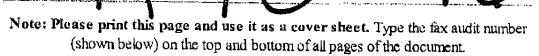
1/23/11

Division of Corporations

Electronic Filing Cove



(((H11000277163 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850) 617-6380

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone

: (850)222-1092

Fax Number

: (850)878-5368

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address pleaso.\*\*

Email Address:

## REGISTERED AGENT CHANGE PATCO DISTRIBUTORS, INC.

| Certificate of Status | 0       |
|-----------------------|---------|
| Certified Copy        | 0       |
| Page Count            | 02      |
| Estimated Charge      | \$35.00 |

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTIL FOR CORPORATIONS

| 1 The name o   | the corporation: PATCO DIS   | TRIBUTORS, I  | NC.  |   |
|--|--|---|--|---|
| 2. The principal office address: 17251 ALICO CENTER ROAD UNIT NO. 4 FORT MYERS FL 33967 US |  |   |  |   |
| 3. The mailing   | address (if different): 17251 A  | LICO CENTER   | ROAD UNIT NO. 4 FORT   | MYERS FL 33967 US   |
| 4. Date of inco  | rporation/qualification:   | 03/03/1989  | Document number:   | K70196  |
|  | ed street address of the current<br>ertment of State: (If resigned,  |   |  | le with the   |
|  | NAPLES-LAWDOCK, INC  |   | ,  | <del></del>   |
|  | 1395 PANTHER LANE SUI  | TE 300  | _  | _ =   |
|  | NAPLES FL 34109 US   |   |  | 30  |
| 6. The name as<br>(if changed)   | nd street address of the new re  | gisterod agent (  | if changed) and /or registere  | d office  |
|  | C 1 Corporation System   |   |  |   |
|  | c/o C T Corporation System,  |   |  | <del></del>   |
|  | Plantation, Florida 33324  | P.O. Box NOT at   | octopolo   |   |
|  | ress of its registered office as<br>il be identical.  The properties of the corporation<br>the board, or the corporation   |   |  |   |
| Such change v  | / /- /   |   | Ron Hatcher  | r CEO   |
| 2/   | Later  |   | 11011 1144444  | , 0.10  |
| MINI   | are of an olicer or smoother of the appointment as register to comply with the provision and am familiar with and a cing filea merely to reflect a 125 been notified in writing at                         | red ayent and a<br>ns of all statute<br>cept the abliga<br>change in the r<br>this change.  | Printed or (yped name  | said little   |
| I hereby accept further agree of my duties, a document is be corporation in                | are of an Olicer or director  of the appointment as registe, to comply with the provision and I am familiar with and ac- ting filed merely to reflect a tag been notified in writing at Corporation System | red ayent and a<br>ns of all statute<br>ccept the obliga<br>change in the r<br>this change. | Printed or (yped name  | i wa we<br>decomplete performance<br>Stered agent. Or, if this<br>hereby confirm that the |
| I hereby accept I further agreed of my duties, document is be corporation in By:           | of the appointment as registe. To comply with the provision and I am familiar with and ac<br>eing filed merely to reflect a<br>as been notified in writing at  | red ayent and a<br>ns of all statute<br>ccept the obliga<br>change in the r<br>this change. | Printed or typed man<br>agree to act in this capacity<br>is relative to the proper an<br>ation of my position as regi<br>registered affice address. I  | i wa we<br>decomplete performance<br>Stered agent. Or, if this<br>hereby confirm that the |
| I hereby accept further agree of my duties, of document is becorporation in By:            | of the appointment as registe.  To comply with the provision and I am familiar with and acting filed merely to reflect a as been notified in writing at Corporation System                                 | red ayent and a<br>ns of all statute<br>ccept the obliga<br>change in the r<br>this change. | Product of types many of the control | i wa we<br>decomplete performance<br>Stered agent. Or, if this<br>hereby confirm that the |

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (805)