N41462

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CALLAHASSEE, FLORIDA

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TRANSMITTAL LETTER

TO: Amendment Section Division of Corporat	ions			
SUBJECT: Brain Trust, Inc	(Name of corporati	on)		_
DOCUMENT NUMBER:_	•	,		
	hange of Registered Office/Ag	ent and fee are sub	mitted for	 filing
	ence concerning this matter to the		101	
Elizabeth S. Winship				
•	of person)	•	=	03.1 TAL
Brain Trust, Inc.	-			京 第 7
	irm/company)	.	<u></u>	ASS 11日 26日 35日 35日 35日 35日 35日 35日 35日 35日 35日 35
3434 Fiddlers Bend				FILED 03 MAR 26 PH 4: 00 SECRETARY OF STATE TALLAHASSEE, FLORIDI
(A	ddress)			ORAT OR
Fernandina Beach, FL 32034				Dr.
(City/state	and zip code)	•		
For further information conc	erning this matter, please call:			
Dennis L. Blackburn	at (<u>904</u> -) 296-7713 & daytime telephor		_
(Name of pers	on) (Area code	& daytime telephor	ne number)	
Enclosed is a \$35.00 check n	nade payable to the Department	of State.		
Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Amendment Section Division of Corporation 409 E. Gaines Street Tallahassee, FL 32399	าร		

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

	of change is submitted fo	or a corporation	7.0502, 607.1508, or 617.150 n organized under the laws of the desired agents	the State of
of Florida.	f the corporation: Brain		ed office or registered agent, o	n boin, in the State
			emandina Beach, FL 32034	
3. The mailing	address (if different):			
4. Date of inco	rporation/qualification:	12/26/90	Document number:	N41462
	nd street address of the cartment of State:	urrent registere	d agent and registered office or	n file with the
	Anthony J. Legglo, Esc	quire		
	303 Centre Street, Ste	, 102		
	Femandina Beach, FL	32034	· · · · · · · · · · · · · · · · · · ·	
6. The name a changed):	Dennis L. Blackburn, E. 5150 Belfort Road, S., 8	squire	d agent (if changed) and /or i	registered office (if
	Jacksonville, FL 32256	· · · · · · · · · · · · · · · · · · ·	·	
The street addragent, as change	ress of its registered offi ged will be identical.	ice and the stree	et address of the business offic	ce of its registered
Such change wanthorized by to such change of the succession of the	as authorized by resolute board or the corporation of the corporation of the project the appointment as rest to comply with the project.	gistered agent of all sto	ed by its board of directors or notified in writing of the change of the capacitation of the proper and the proper as	ity, nd complete
perjormance oj registered ager	t my duties, and 1 am fa. at. Or. if this document	miliar with and is being filed n	daccept the obligation of my parely to reflect a change in the has been notified in writing of	position as he revistered
If signing on beha		·		
	Typed or Printed Name)	FILING FEE	(Capacity)	O3 MAR SEGRET AL_AH
	MAKE CHECKS FAYABLE	e to Florida Depar	TMENT OF STATE AND MAIL 10: 27, TALLAKASSEE, FL 32314	FILE(26 PI ARY OF ASSEE,