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Office Use Only

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

1.	
(Corporation Name)	(Document #)
2(Corporation Name)	(Document #)
3(Corporation Name)	(Document #)
4. (Corporation Name)	(Document #)
Walk in Pick up time Mail out Will wait	Certified Copy Certificate of Status
NEW FILINGS Profit Not for Profit Limited Liability Domestication Other OTHER FILINGS Annual Report Fictitious Name	AMENDMENTS Amendment Resignation of R.A., Officer/Director Change of Registered Agent Dissolution/Withdrawal Merger REGISTRATION/QUALIFICATION Foreign Limited Partnership Reinstatement Trademark Other

Examiner's Initials

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 PIOI (COC)
submits the following statement in order to change its registered office of registered agona, or com,
1. The name of the corporation is: Jack and Norma Sue Williams
1. The name of the corporation is the form of the corporation is the corpo
Parting Fauracion, The
2. The mailing address of the corporation is: 101 B10 CINAO CINAO
Jacksonville FC 32201
3. Date of incorporation/qualification: $10/7/97$ Document number: $10/7/97$ Document number: $10/7/97$
4. The name and address of the current registered agent and office:
Michael N. Schneider
4215 Southpoint Blvd. #100
CACKSONVILLE TO SELLA COUNTABLE)
5. The name and address of the new registered agent and office: (P. O. Box Not Acceptable)
Michael N. Schneider
5150 Belfort Kood, Bldg. 100
LACKSONVILLE, FL 32256
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.
Dhu H. William (Date) (Date)
(Signature of an officer, chairman or vice chairman of the board) (Date)
CACK Williams, Tresident (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. 7/1/00 Pm 8
(Date)
(Typed or Printed Name) (Capacity)
* * * FILING FEE: \$35.00 * * * PRI 1: 9
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