

N97000006547

MAGNOLIA  
Properties

October 14, 2008

Florida Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

To Whom It May Concern:

This letter is to request an officer name change from Eileen G. Blocker or Eileen Blocker to **Eileen Blocker Milam** for the following corporations:

1. Coastal Food Brokers, Inc.  
Document Number: P08000085937  
FEI Number: None
2. Magnolia Referrals, Inc.  
Document Number: P98000084492  
FEI Number: 593652223
3. Magnolia Properties of Jacksonville, Inc.  
Document Number: P96000032578  
FEI Number: 593375409
4. The Title Company of Jacksonville, Inc.  
Document Number: P02000045618  
FEI Number: 043652154
5. Angelworks of Jacksonville, Inc.  
Document Number: N97000006547  
FEI Number: 593477539
6. Magnolia Construction of Jacksonville, Inc.  
Document Number: P07000022202  
FEI Number: 208497841
7. Blocker Rental Management, LLC  
Document Number: L07000002973  
FEI Number: 208185496

000137136070

FILED  
08 OCT 23 AM 11:48  
DIVISION OF STATE  
CORPORATIONS  
TALLAHASSEE, FLORIDA

I have enclosed a copy of my marriage certificate as well as the documents of each corporation. If you have any question, please feel free to contact me at (904) 348-5665 or my assistant, Monique, at (904) 821-3083.

Thank you,

*Eileen Blocker Milam*

Eileen Blocker Milam  
Broker

9086 Cypress Green Drive  
Jacksonville, Florida 32256  
Office (904) 348-5665 Fax (904) 348-5548  
www.magnoliaproperties.com

① change name due to marriage  
OK  
123

Department of Health • Vital Statistics

STATE OF FLORIDA  
MARRIAGE RECORD

TYPE IN UPPER CASE  
USE BLACK INK

This license not valid unless seal of Clerk,  
Circuit or County Court, appears thereon.

Recorded ~~STATE FILE~~ FILE NUMBER

Records 10/02/2008 at

09:31 AM, OR Book 14655

Page 1233, Instrument #

2008251310,

Jim Fuller Clerk of the

Circuit Court

Duval County, FL

2008 ML 1226732

(APPLICATION NUMBER)

APPLICATION TO MARRY

|  |                     |   |   |
|--|---------------------|---|---|
| 1. GROOM'S NAME (First, Middle, Last)<br>JACK RALPH MILAM JR   |                     | 2. DATE OF BIRTH (Month, Day, Year)<br>05/23/1955 |   |
| 3a. RESIDENCE - CITY, TOWN, OR LOCATION<br>JACKSONVILLE        | 3b. COUNTY<br>DUVAL | 3c. STATE<br>FLORIDA                              | 4. BIRTHPLACE (State or Foreign Country)<br>FLORIDA |
| 5a. BRIDES NAME (First, Middle, Last)<br>EILEEN GALVIN BLOCKER |                     | 5b. MAIDEN SURNAME (If different)<br>GALVIN       | 6. DATE OF BIRTH (Month, Day, Year)<br>07/27/1954   |
| 7a. RESIDENCE - CITY, TOWN, OR LOCATION<br>JACKSONVILLE        | 7b. COUNTY<br>DUVAL | 7c. STATE<br>FLORIDA                              | 8. BIRTHPLACE (State or Foreign Country)<br>TEXAS   |

WE THE APPLICANTS NAMED IN THIS CERTIFICATE, EACH FOR HIMSELF OR HERSELF, STATE THAT THE INFORMATION PROVIDED ON THIS RECORD IS CORRECT TO THE BEST OF OUR KNOWLEDGE AND BELIEF, THAT NO LEGAL OBJECTION TO THE MARRIAGE NOR THE ISSUANCE OF A LICENSE TO AUTHORIZE THE SAME IS KNOWN TO US AND HEREBY APPLY FOR LICENSE TO MARRY.

|   |   |
|---|---|
| 9. SIGNATURE OF GROOM (Sign full name using black ink)<br>> <i>Jack Ralph Milam Jr</i>    | 10. SUBSCRIBED AND SWORN TO BEFORE ME ON (DATE)<br>09/05/2008     |
| 11. TITLE OF OFFICIAL<br>DEPUTY CLERK <i>Jack Ralph Milam Jr</i>                          | 12. SIGNATURE OF OFFICIAL (Use black ink)<br>> <i>[Signature]</i> |
| 13. SIGNATURE OF BRIDE (Sign full name using black ink)<br>> <i>Eileen Galvin Blocker</i> | 14. SUBSCRIBED AND SWORN TO BEFORE ME ON (DATE)<br>09/05/2008     |
| 15. TITLE OF OFFICIAL<br>DEPUTY CLERK <i>Eileen Galvin Blocker</i>                        | 16. SIGNATURE OF OFFICIAL (Use black ink)<br>> <i>[Signature]</i> |

LICENSE TO MARRY

AUTHORIZATION AND LICENSE IS HEREBY GIVEN TO ANY PERSON DULY AUTHORIZED BY THE LAWS OF THE STATE OF FLORIDA TO PERFORM A MARRIAGE CEREMONY WITHIN THE STATE OF FLORIDA AND TO SOLEMNIZE THE MARRIAGE OF THE ABOVE NAMED PERSONS. THIS LICENSE MUST BE USED ON OR AFTER THE EFFECTIVE DATE AND ON OR BEFORE THE EXPIRATION DATE IN THE STATE OF FLORIDA IN ORDER TO BE RECORDED AND VALID.

|  |                                       |   |                                   |
|--|---------------------------------------|---|-----------------------------------|
| 17. COUNTY ISSUING LICENSE<br>DUVAL                              | 18. DATE LICENSE ISSUED<br>09/05/2008 | 18a. DATE LICENSE EFFECTIVE<br>09/08/2008 | 19. EXPIRATION DATE<br>11/07/2008 |
| 20a. SIGNATURE OF COURT CLERK OR JUDGE<br>> BY <i>Jim Fuller</i> |                                       | 20b. TITLE<br>CLERK OF CIRCUIT COURT      | 20c. BY D.C.<br>LLB               |

CERTIFICATE OF MARRIAGE

I HEREBY CERTIFY THAT THE ABOVE NAMED GROOM AND BRIDE WERE JOINED BY ME IN MARRIAGE IN ACCORDANCE WITH THE LAWS OF THE STATE OF FLORIDA.

|  |   |
|--|---|
| 21. DATE OF MARRIAGE (Month, Day, Year)<br>September 26, 2008                                    | 22. CITY, TOWN, OR LOCATION OF MARRIAGE<br>JACKSONVILLE BEACH                       |
| 23a. SIGNATURE OF PERSON PERFORMING CEREMONY (Use black ink)<br>> <i>Rev. Dr. John L. Oliver</i> | 23c. ADDRESS (Of person performing ceremony)<br>PO BOX 16441 JACKSONVILLE, FL 32245 |
| 23b. NAME AND TITLE OF PERSON PERFORMING CEREMONY (Or notary stamp)<br>Rev. Dr. John L. Oliver   | 24. SIGNATURE OF WITNESS TO CEREMONY (Use black ink)<br>> <i>[Signature]</i>        |
|  | 25. SIGNATURE OF WITNESS TO CEREMONY (Use black ink)<br>> <i>[Signature]</i>        |

INFORMATION BELOW FOR USE BY VITAL STATISTICS ONLY. NOT TO BE RECORDED

|       |   |                   |   |  |  |  |
|-------|---|-------------------|---|--|--|--|
| GROOM | 26. SOCIAL SECURITY NUMBER<br>265194538 | 27. RACE<br>WHITE | 28. WERE YOU EVER PREVIOUSLY MARRIED?<br>NO <input checked="" type="checkbox"/> YES | IF ANSWER IS 'YES' TO ITEM 28, THEN COMPLETE ITEMS 29a, 29b, and 29c |  |  |
|       |   |                   |   | 29a. NO. OF THIS MARRIAGE<br>03                                      | 29b. LAST MARRIAGE ENDED BY (DEATH, DIVORCE OR ANNULMENT)<br>DIVORCE | 29c. DATE LAST MARRIAGE ENDED (Mo., Day, Year)<br>06/18/2007 |
| BRIDE | 30. SOCIAL SECURITY NUMBER<br>261152115 | 31. RACE<br>WHITE | 32. WERE YOU EVER PREVIOUSLY MARRIED?<br>NO <input checked="" type="checkbox"/> YES | IF ANSWER IS 'YES' TO ITEM 32, THEN COMPLETE ITEMS 33a, 33b, and 33c |  |  |
|       |   |                   |   | 33a. NO. OF THIS MARRIAGE<br>02                                      | 33b. LAST MARRIAGE ENDED BY (DEATH, DIVORCE OR ANNULMENT)<br>DIVORCE | 33c. DATE LAST MARRIAGE ENDED (Mo., Day, Year)<br>12/19/1990 |

STATE OF FLORIDA  
DUVAL COUNTY

I, THE UNDERSIGNED Clerk of the Circuit Court, Duval County  
Florida, DO HEREBY CERTIFY the within and foregoing is a true  
and correct copy of the original as it appears on record and file  
in the office of the Clerk of Circuit Court of Duval County, Florida  
WITNESS my hand and seal of Clerk of Circuit Court  
Jacksonville, Florida, this the 5 day of OCTOBER, A.D., 2028

JIM FULLER

Clerk, Circuit and County Court:  
Duval County, Florida

By Rhonda Figueroa  
Deputy Clerk

