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COVER LETTER

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COVER LETTER
COVER LETTER To: Amendment Section Division of Corporations SUBJECT: METHODFACTORY, INC. (Name of corporation)
SUBJECT: METHODFACTORY, INC.
(Name of corporation)
DOCUMENT NUMBER: P00000024561
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
JAMES WILLIAMSON
(Name of contact person)
METHODFACTORY, INC.
(Firm/Company)
240 N. WASHINGTON BLVD., SUITE 260
(Address)
SARASOTA, FL 34236
(City/state and zip code)
For further information concerning this matter, please call:
BRUCE M. RODGERS, ESQ. <u>at (813</u>) 258-8588
(Name of contact person) (Area code & daytime telephone number)
Enclosed is a \$35.00 check made 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 Corporations 409 E. Gaines Street Tallahassee, FL 32399

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this ange is submitted for a corporation organized under the laws of the State of Florida er to change its registered office or registered agent, or both, in the State of Florida.
	the corporation: METHODFACTORY, INC.
2. The principal	office address: 240 N. WASHINGTON BLVD., SUITE 260, SARASOTA, FL 34236
3. The mailing a	address (if different):
4. Date of incor	poration/qualification: MARCH 9, 2000 Document number: POOOOO24561
	d street address of the current registered agent and registered office on file with the rtment of State:
	MICHAEL PENMAN
	240 N. WASHINGTON BLVD., SUITE 260
	SARASOTA, FL 34236
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered office
	JAMES WILLIAMSON
	240 N. WASHINGTON BLVD., SUITE 260
	(P.O. Box NOT acceptable) SARASOTA, FL 34236
	ess of its registered office and the street address of the business office of its registered agent, I be identical.
authorized by t	as authorized by resolution duly adopted by its board of directors or by an officer so he board, or the corporation has been notified in writing of the change.
ISienat	JAMES WILLIAMSON, DIRECTOR Ure of an officer or director) Urrinted or typed name and title)
//	t the appointment as registered agent and agree to act in this capacity. to comply with the provisions of all statutes relative to the proper and complete performance nd I am familiar with and accept the obligation of my position as registered agent. Or, if this ing filed merely to reflect a change in the registered office address, I hereby confirm that the s been notified in writing of this change.
	9/24/04
(Si	ignature of Registered Agent) (Date)
If signing on be	ehalf of an entity:
JAMes	hillips an
ľ	I VOCH OF COUNCE DATE !

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