

P00000034987

Requester's Name

Tom Howard  
1101 Pinellas Bayway, #402  
Tierra Verde, Florida 33715

Office Use Only

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

1. \_\_\_\_\_ (Corporation Name) = \_\_\_\_\_ (Document #) **700003348077--6**  
-08/07/00--01132--010  
\*\*\*\*\*35.00 \*\*\*\*\*35.00
2. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #)
3. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #)
4. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #)

- |                                   |   |  |
|-----------------------------------|---|--|
| <input type="checkbox"/> Walk in  | <input type="checkbox"/> Pick up time _____ | <input type="checkbox"/> Certified Copy        |
| <input type="checkbox"/> Mail out | <input type="checkbox"/> Will wait          | <input type="checkbox"/> Photocopy             |
|                                   |   | <input type="checkbox"/> 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

**FILED**  
00 AUG -7 PM 4: 22  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Examiner's Initials

*AS 8/17*

**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 \_\_\_\_\_  
submits the following statement in order to change its registered office or registered agent, or both, in  
the State of Florida.

1. The name of the corporation is: SEMINOLE MARKETING SERVICES, INC.

2. The mailing address of the corporation is: ~~HOT~~

3. Date of incorporation/qualification: \_\_\_\_\_ Document number: \_\_\_\_\_

4. The name and address of the current registered agent and office: WILLIAM THOMAS HOWARD

6590 BEACH RESORT DRIVE #10  
NAPLES, FL 34114

5. The name and address of the new registered agent and office: (P. O. Box Not Acceptable)

WILLIAM THOMAS HOWARD  
1101 PINELLAS BAYWAY #402  
TIERRA VERDE, FL 33715

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.

[Signature]  
(Signature of an officer, chairman or vice chairman of the board)

8/4/00  
(Date)

W. TOM HOWARD PRESIDENT  
(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.

[Signature]  
(Signature of Registered Agent)

[Date]  
(Date)

If signing on behalf of an entity:

[Name]  
(Typed or Printed Name)

[Capacity]  
(Capacity)

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

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00 AUG -7 PM 4:22  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA