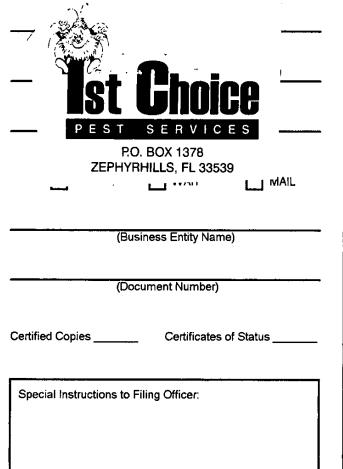
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Office Use Only



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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, this
statement of change is submitted for a corporation organized under the laws of the State of FLORIDA
in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: FIRST Choke Past Services OF Pasco County, I
2. The principal office address: 4733 Allon Roan
ZEPHYRHILLS, FL 33541
3. The mailing address (if different): P.O. Box 1378
ZEDHURIFIUS, FL 33539
4. Date of incorporation/qualification: 4/21/2000 Document number: P0000041310
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
DAVID J. MURDHY
14217 THIRD St.
DADI City, FL 33523
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
(P.O Box NOT acceptable)
Zephyriticis, Fr 33542
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 beard, or the corporation has been notified in writing of the change.
The Town Jimmy BROWNELL
hereby accept the appointment as registered agent and agree to act in this capacity. (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. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.
G-79-07 (Date)
If signing on behalf of an entity: Jimmy Blowner (Typed or Printed Name)

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