## P00000054391

| (Requestor's Name)                      |                    |           |  |  |
|---|--------------------|-----------|--|--|
| (Address)                               |                    |           |  |  |
| (Address)                               |                    |           |  |  |
| (Ci                                     | ty/State/Zip/Phone | · #)      |  |  |
| PICK-UP                                 | ☐ WAIT             | MAIL      |  |  |
| (Bu                                     | isiness Entity Nam | ne)       |  |  |
| (Document Number)                       |                    |           |  |  |
| Certified Copies                        | Certificates       | of Status |  |  |
| Special Instructions to Filing Officer: |                    |           |  |  |
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Office Use Only



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## TRANSMITTAL LETTER

| TO: Amendment Section<br>Division of Corporations                                       |  |                            |                |                 |                    |      |  |
|---|--|----------------------------|----------------|-----------------|--------------------|------|--|
| SUBJECT: ABRAMSON AGENCY, INC.  | ame of corporation   | <del></del>                | Vac*           |                 |                    | -    |  |
| (Name of corporation)   |  |                            |                |                 |                    |      |  |
| DOCUMENT NUMBER: P00000054391   | · <del></del>  |                            | ; <u>\$</u>    |                 |                    |      |  |
| The enclosed Statement of Change of Regist  | ered Office/Agent  | t and fee are su           | ıbmitted for   | filing.         |                    |      |  |
| Please return all correspondence concerning   | this matter to the   | following:                 |                |                 |                    |      |  |
| MICHAEL R ABRAMSON (Name of person)   | 100  |                            | " <del>"</del> |                 |                    |      |  |
| ABRAMSON AGENCY, INC. (Name of firm/company)  | ***  | •                          |                | SE CR           | 03 MJ              |      |  |
| 9965-54 SAN JOSE BLVD (Address)   | -  |                            |                | ETAKY<br>AHASSI | 7                  | 7117 |  |
| JACKSONVILLE, FL 32257  (City/state and zip code)                                       | · <del>*</del>   |                            |                | OF STATE        | DO HAY IL AM 4: DO |      |  |
| For further information concerning this matter  | er, please call:   |                            |                | همتنؤ           |                    |      |  |
| MICHEAL R ABRAMSON (Name of person)   | at ( <u>904</u> )<br>(A rea code &   | 288-8821<br>daytime teleph | one number)    | <del>-</del>    |                    |      |  |
| Enclosed is a \$35.00 check made payable to   | the Department of  | State.                     |                |                 |                    |      |  |
| Amendment Section Amenda<br>Division of Corporations Division<br>P.O. Box 6327 409 E. ( | Address:<br>ment Section<br>n of Corporations<br>Gaines Street<br>ssee, FL 32399 |                            |                |                 |                    |      |  |

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

ATX1

| Pursuant to the provisions of sections 607.0502, 617.050 the undersigned corporation organized under the laws of   |  |
|--|--|
| submits the following statement in order to change its reg   |  |
| the State of Florida.  | istored emoc or registered agent, or betti, in   |
| The name of the corporation: ABRAMSON AGENCY, IN   | -<br>IC  |
| THE MARIE OF THE CORPORATION PROPERTY AND A PROPERT |  |
| Νεω  |  |
| 2. The mailing address of the corporation: 9965-54 SAN   | JOSE BLVD  |
| JACKSONVILLE, FL 32257   |  |
| 3. Date of incorporation/qualification: 6/5/2000   | Document number: P00000054391                    |
| 4. The name and address of the current registered agent  | and office:                                      |
| MICHAEL D ADDAMCON   | •  |
| MICHAEL R ABRAMSON   | · <del>-</del>                                   |
| 6053 ST AUGUSTINE ROAD   | <del>_</del>                                     |
| JACKSONVILLE, FL 32217   | -  |
| 5. The name and address of the new registered agent (if  | changed) and/or registered office of Enanged):   |
| (P. O. Box Not   |  |
| muhaer R Ahran   | 7507 慧丰品   |
| MICHAEL IT, ADMI   |  |
| 9965-54 SAN JOSE BLVD  |  |
| JACKSONVILLE, FL 32257   |  |
|  |  |
| The street address of its registered office and the street a agent, as changed, will be identical.   | address of the business office of its registered |
| Such change was authorized by resolution duly adopted to   | by its board of directors or by an officer so    |
| authorized by the board  | 5/12/03  |
| Signature of an officer, chairman or vice chairman of the boa  | rd) (Date)                                       |
| MICHAEL R ABRAMSON, PRESIDENT  |  |
| (Printed or typed name and title)  |  |
| Having been named as registered agent and to accept se<br>corporation, I hereby accept the appointment as registere<br>I further agree to comply with the provisions of all statutes   | d agent and agree to act in this capacity.       |
| performance of my duties, and I am familiar with and acce  |  |
| registered agent   | <u> </u>   |
| (Spenstyre of Boristand Area)  | - 5/12/03  |
| (Signature of Registered Agent)  | (Date)   |
| If signing on behalf of an entity:   | <del>.</del>                                     |
| MICHAEL R ABRAMSON (Typed or Printed Name)   | PRESIDENT<br>(Capacity)                          |
| ( ) post of ( ) interest ( ) interest ( )  | (porting)  |

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