

## Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet** 

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## REGISTERED AGENT CHANGE PAYROLL USA, INC.

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Corporate Filing Menu

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12-1/2-1/6/15/2011 BYNUN

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

1.0			
	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes ange is submitted for a corporation organized under the laws of the State of Florida	t, this	
	ange is submitted for a corporation organized under the taws of the state of <u>Plorida</u> . For to change its registered office or registered agent, or both, in the State of Plorida.		
	the corporation: Payroll USA, Inc.		
2. The principal	d office address: 4912 26th St W Ste 200, Bradenton, Florida 34207		
3. The mailing	address (if different):		
4. Date of incor	rporation/qualification: 8/4/2000 Document number: P00000075629		
	nd street address of the current registered agent and registered office on file with the artment of State: (If resigned, enter resigned)		
	LATREILLE, LUCIEN C		
	4912 26TH STREET W	_ 12	
	SUITE 200 BRADENTON FL 34207-1707	ASE =	
		EG E	71
6. The name an (if changed):	nd street address of the new registered agent (if changed) and /or registered office	2011 JUH 15" AN 9: SECRETARY OF ST	T
	C T Corporation System	THE SE	C
	1200 South Pine Island Road, Piantation, Florida 33324 P.O. Box NOT acceptable	TATE ORIDE	
The street addr as changed wil	ress of its registered office and the street address of the business office of its registle identical.	tered agent,	
Such change w authorized by t	vas authorized by resolution duly adopted by its board of directors or by an officer the board, or the corporation has been notified in writing of the change.	r so	
-1-	Lucien C. Latreille, President		
	ife of an officer or director Printed or typed name and tills		
I hereby accept I further agree of my duties, an document is be corporation ha	I 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 pand I am familiar with and accept the obligation of my position as registered agen ting filed merely to reflect a change in the registered office address, I hereby confirm notified in writing of this change.	performance 1. Or, if this irm that the	
Nahl			
Sig	grature of Registered Agent 8th day of June, 2011 Date	<u></u>	
If signing on be	chalf of an entity:		
Mark Williams			
1	Typed or Printed Name		
	* * * FILING FEE: \$35.00 * * *		

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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