## P00000108044

(Red	questor's Name)	
(Add	dress)	
(Add	dress)	117 - F118
(City	//State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bus	siness Entity Nar	ne)
(Document Number)		
Certified Copies	Certificates	s of Status
Special Instructions to Filing Officer:		

Office Use Only



900115984989

01/28/08--01013--002 \*\*35.00

TILED

TORETARY OF STATE ACROSS

TORETARY OF STATE ACROSS

1/30/08

## **COVER LETTER**

TO:	Amendment Section Division of Corporations	•
SUBJ	ECT: Scott W. O'Connor, Inc.	orporation)
DOC	UMENT NUMBER: P00000108044	
	nclosed Statement of Change of Registered Office	e/Agent and fee are submitted for filing
	e return all correspondence concerning this matter	
	Glenda O'Connor	
(Name of Contact Person)		
Scott W. O'Connor, Inc. (Firm/Company)		
	( ec	·····
	9008 Heckscher Drive	
	(Add	ress)
	·	
	Jacksonville, FL 32226	
	(City/State ar	•
For fu	rther information concerning this matter, please of	all:
Scott	O'Connor	at ( 904 ) 251-3097
	(Name of Contact Person)	at ( 904 ) 251-3097 (Area Code & Daytime Telephone Number)
Enclos	sed is a \$35.00 check made payable to the Depart	ment of State.
	Mailing Address: Amendment Section	Street Address: Amendment Section
	Amendment Section Division of Corporations	Amendment Section Division of Corporations
	P.O. Box 6327	Clifton Building
	Tallahassee, FL 32314	2661 Executive Center Circle
	·	Tallahassee, FL 32301

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

statement of ch	ange is submitted for a corporation o	7.0502, 607.1508, or 617.1508, Florida Statutes, this organized under the laws of the State of Florida egistered agent, or both, in the State of Florida.
1. The name of	the corporation: Scott W. O'Connor,	Inc.
2. The principa	l office address: 9008 Heckscher Dri	ve
Jacksonvill	e, FL 32226	
3. The mailing	address (if different):	
4. Date of incom	rporation/qualification: November 2	0, 2000 Document number: P00000108044
	d street address of the current register urtment of State:	red agent and registered office on file with the
	Intrastate Registered Agent (	Corporation
•	300 Brickell Avenue, Suite 3000	
	Miami, Florida 33131	
6. The name and (if changed):		agent (if changed) and /or registered office
	Glanda Sally 1	O'Connor To E
	9008 Heckscher Drive	Bri F
	(P.O. Box NOT acce)  Jacksonville, Florida 32226	
	Jacksonville, Florida 32220	
as changed will	i de identical.	reet address of the business office of its registered agent,
Such change wauthorized by	as authorized by resolution duly add he board, or the corporation has bee	opted by its board of directors or by an officer so in notified in writing of the change.
Most (Signal	W Obanno ure of an officer or director)	Scott W. O'Connor President (Printed or typed name and title)
I hereby accept I further agree of my duties, ar document is bet corporation ha	t the appointment as registered ager to comply with the provisions of all nd I am familiar with and accept the ing filed merely to reflect a change is s been notified in writing of this cha	nt and agree to act in this capacity. statutes relative to the proper and complete performance obligation of my position as registered agent. Or, if this in the registered office address, I hereby confirm that the inge.
Hlerda	Sally O(mor	01-23-08 (Date)
If signing on be	chalf of an entity:	(2012)
Scott W. O'Co	onnor. Inc.	
	Typed or Printed Name)	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (8/05)

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