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June 11, 2001

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Re:

Ellen S. Maher, P.A.

Dear Sir or Madam:

Enclosed please find Statement of Change of Registered Office along with check in the amount of \$35.00 for filing fee.

PLEASE NOTE: Please also change the mailing address and principal address of the corporation to 201 West Marion Ave., Suite 104, Punta Gorda, FL 33950. Thank you.

Sincerely,

Ellen S. Maher

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R.A. Change

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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, the undersigned corporation organized under the laws of the State of Florida Statutes.
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: Flew S. Maher, P. A.
1. The name of the corporation:
2. The mailing address of the corporation: 201 West Marion Hve.,
Suite 104, Punta Gorda, FL 33950
3. Date of incorporation/qualification: 03/27/01 Document number: Poloco32960
4. The name and address of the current registered agent and office:
Fllen S. Maher 20 1 1
700
Punta Gorda, FL 33955
5. The name and address of the new registered agent (if changed) and/or registered office (if changed): (P. O. Box Not Acceptable)
Ellen S. Maher
201 West Marion Ave., Suite 104
Punta Gorda, FL 33950
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
authorized by the board
(Signature of an officer, chairman or vice chairman of the board) (Date)
Flore S M Las Discher Des Or +
Ellen S. Maher, Director, 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
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.
6/11/01
(Signature of Registered Agent) (Date)
If signing on behalf of an entity:
Typed or Printed Name) (Capacity)
(
* * * FILING FEE: \$35.00 * * *

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