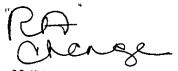
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(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	

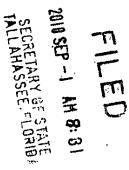
Office Use Only



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09/01/10--01010--001 **35.00



COVER LETTER

Amendment Section Division of Corporations			
SUBJECT: FLORIDA DESIGN SOLUTIONS, INC. Name of Corporation			
DOCUMENT NUMBER: P0200001067	75		
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.			
Please return all correspondence concerning this matter to the following:			
•			
TREVOR K. BREWER, ESQ.			
Name of Contact Person			
BREWERLONG PLLC			
Firm/Company			
007 1 004/01/7 71 4 05 01/8	TE 400		
237 LOOKOUT PLACE SUITE 100 Address			
. Audress			
,			
MAITLAND, FL 32751 City/State and Zip Code			
City/State and Zip Code			
TBREWER@BREWERLONG.COM			
E-mail address: (to be used for future annual report notification)			
For further information concerning this matter, please call:			
TREVOR K. BREWER, ESQ. at (40	7 \ 660-2964		
Name of Contact Person Area C	7) 660-2964 Code & Daytime Telephone Number		
Enclosed is a \$35.00 check made payable to the Department of State.			
Mailing Address: St Amendment Section A	reet Address: mendment Section		
	ivision of Corporations		
	lifton Building		
	661 Executive Center Circle		
- 	allahassee, FL 32301		

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

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.
The name of the corporation: FLORIDA DESIGN SOLUTIONS, INC. The principal office address: 951 S ORANGE BLOSSOM TRAIL, APOPKA, FL 32703
2. The principal office address.
3. The mailing address (if different):
4. Date of incorporation/qualification: 01/30/2002 Document number: P02000010675
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)
HENDRY, STONER & BROWN, P.A.
20 N. ORANGE AVE SUITE 600
ORALNDO, FL 32801
ORALNDO, FL 32801 6. The name and street address of the new registered agent (if changed) and /or registered office Signal (if changed):
BREWERLONG PLLC
237 LOOKOUT PLACÉ SUITE 100 P.O. Box NOT acceptable MAITLAND, FL 32751
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, or the corporation has been notified in writing of the change.
MICHAEL T. KEESEE, PRESIDENT Printed or typed name and title
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 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.
Signature of Registered Agent Date
If signing on behalf of an entity:
TLEWR K BREWER MANGING MEMBER
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

CR2E045 (8/05)