

SUBJECT: Bredel Corporation	±< 8
(Name of corporation)	
DOCUMENT NUMBER: P02000031413	AND FI
The enclosed Statement of Change of Registered Office/Agent and fee are su	bmitted for filing - 8
Please return all correspondence concerning this matter to the following:	A FLORE
Serena Vestinos, Director of Legal and Conract Services (Name of person)	RDA 15
Bredel Corporation	
(Name of firm/company)	
2637 McCormick Drive	:000078207626
(Address)	-09/18/0201019004 ****455.00 *****35.00
Clearwater, FL 33759	
(City/state and zip code)	
For further information concerning this matter, please call:	
Serena Vestinos at (727) 669-4522, ext (Name of person) (Area code & daytime teleph	

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
409 E. Gaines Street Tallahassee, FL 32399

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

Pursuant to th	e provisions of sections 607.0502,	617.0502, 607.1508, or 617.150	8, Florida Statutes,	
this statement o	of change is submitted for a corpora	tion organized under the laws of	the State of	
Florida	in order to change its regist	tered office or registered agent, c	or both, in the State	
of Florida.				
1. The name of	the corporation: Bredel Corporation			
2. The principa	l office address: 1715 North Westsh	ore Boulevard, Suite 918, Tampa, F	L 33607	
		<u> </u>		
3. The mailing	address (if different):_Same			
	, , ,		<u> </u>	
4. Date of incom	rporation/qualification: 2/17/1993	Document number:	P02000031413	
	<u>-</u>			
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:				
	Bobby L. Coates		8	
	-			
	2637 McCormick Drive		ASSET I	
	Clearwater, FL 33759		8 E	
6 The name of	nd atmost address of the			
changed):	nd street address of the new registe	ered agent (if changed) and for i	registered nuffice (if	
·g- - -/-	Christopher P. Calkin, P.A c/o Chris	stopher P. Calkin, Esquire	DA 6	
	1715 North Westshore Boulevard, Su	uite 918		
(P.O. Box or personal mailbox NOT acceptable)				
	Tampa, FL 33607			
The street addreagent, as chang	ess of its registered office and the st ed will be identical.	reet address of the business offic	e of its registered	
Such change was authorized by the	as authorized by resolution duly add ne board, of the corporation has bee	opted by its board of directors or notified in writing of the chang	by an officer so	
1/M/M	, h you	Bobby L. Coates, President & CE	E O	
I hereby accent	chairman or vice chairman of the board)	(Printed or typed name and title		
I further agree performance of	the appointment as registered ager to comply with the provisions of all my duties, and I am familiar with a to Or if this document is being block	it and agree to act in this capaci statutes relative to the proper ai ind accept the obligation of my p	ty. 1d complete osition as	
office address,	t. Or, if this document is being filed I hereby confirm that the corporation	d merely to reflect a change in the in the in the in the in the in writing of	e registered this change.	
(S	ignature of Registered Agent)			
If signing on behal	,	, , (Date)		
Christopher P. C	-			
(7)	yped or Printed Name)	(Capacity)	<u> </u>	

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