## P02000122656

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## COVER LETTER

TO: Amendment Section Division of Corporations	**************************************
SUBJECT: Sentinel Fiduciary S	ervices, Inc.
(Name of V	Corporation)
DOCUMENT NUMBER: P02000122656	· · · · · · · · · · · · · · · · · · ·
The enclosed Statement of Change of Registered Office	ce/Agent and fee are submitted for filing.
Please return all correspondence concerning this matter	er to the following:
	•
Joseph Bogdahn (Name of Co	
(Name of Co	ontact Person)
Sentinel Fiduciary S	ervices, Inc.
(Firm/C	Company)
340 W. Central Avenu	ė
(Ad	dress)
Winter Haven, FL 338	80
(City/State a	and Zip Code)
For further information concerning this matter, please	call:
Joseph Bogdahn	at ( 863 ) 293-8289
(Name of Contact Person)	at ( 863 ) 293–8289 (Area Code & Daytime Telephone Number)
Enclosed is a \$35.00 check made payable to the Depa	rtment of State
Mailing Address: Amendment Section	Street Address: Amendment Section
Division of Corporations	
P.O. Box 6327	Clifton Building 2661 Executive Center Circle
Tallahassee, FL 32314	Tallahassee, FL 32301

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

	607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this
	corporation organized under the laws of the State of Florida cred office or registered agent, or both, in the State of Florida.
1. The name of the corporation:	Sentinel Fiduciary Services, Inc.
2. The principal office address:	340 W. Central Avenue
	Winter Haven, FL 33880
3. The mailing address (if different):_	Same
4. Date of incorporation/qualification	11-18-02 Document number: P02000122656
5. The name and street address of the Florida Department of State:	current registered agent and registered office on file with the
	Stephen J. Lansing
	605 S. Delaney Avenue
<del></del>	Orlando, FL 32801  new registered agent (if changed) and /or registered office
6. The name and street address of the (if changed):	new registered agent (if changed) and /or registered office
<del> </del>	Joseph Bogdahn
	340 W. Central Avenue
(	(P.O. Box NOT acceptable) Winter Haven, FL 33880
The street address of its registered o as changed will be identical.	office and the street address of the business office of its registered agent,
Such change was authorized by rescauthorized by the board, or the corp	olution duly adopted by its board of directors or by an officer so oration has been notified in writing of the change.
(Signature of an officer or director)	Joseph Bogdahn (Printed or typed name and title)
I hereby accept the appointment as I further agree to comply with the poof my duties, and I am familiar with document is beingfiled merely to recorporation has been notified in writing the corporation of the corporation with the corporation of the corporation with the corporation of the c	registered agent and agree to act in this capacity rovisions of all statutes relative to the proper and complete performance and accept the obligation of my position as registered agent. Or, if this flect a change in the registered office address, I hereby confirm that the iting of this change.
los/10	January 26, 2006
(Signature of Registered Agent	(Date)
If signing on behalf of an entity:	
(Typed or Printed Name)	

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