

P03000034161

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

R. A. Chang

G. Coultette AUG 28 2007

## COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT:

Powell Referral Co.  
(Name of Corporation)

DOCUMENT NUMBER:

CQ1016433

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:

Jay Oscar  
(Name of Contact Person)

Marie Powell & Co.  
(Firm/Company)

875 Pasadena Ave South  
(Address)

St. Petersburg, FL 33707  
(City/State and Zip Code)

For further information concerning this matter, please call:

Jay Oscar at (727) 341-0000  
(Name of Contact Person) (Area Code & Daytime Telephone Number)

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  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

August 17, 2007

JACQYN OSCAR  
MARIE POWELL & CO  
875 PASADENA AVE., SOUTH  
ST. PETERSBURG, FL 33707

SUBJECT: POWELL REFERRAL COMPANY, INC.  
Ref. Number: P03000034161

We have received your document for POWELL REFERRAL COMPANY, INC. and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The current name of the entity is as referenced above. Please correct your document accordingly.

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6903.

Cheryl Coulliette  
Document Specialist

Letter Number: 607A00050118

**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, this 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.

1. The name of the corporation: Powell Referral Company, INC.
2. The principal office address: 875 Pasadena Ave South  
St. Petersburg, FL 33707
3. The mailing address (if different): Same As Above
4. Date of incorporation/qualification: \_\_\_\_\_ Document number: \_\_\_\_\_
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: John E. Powell  
875 Pasadena Ave So.  
St. Petersburg, FL 33707

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Arlann McDonald PO 3000034161  
875 Pasadena Ave So.  
St. Petersburg, FL 33707  
(P.O. Box NOT acceptable)

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.

Maria Powell

(Signature of an officer or director)

Maria E. Powell

(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.*

X Arlann McDonald

(Signature of Registered Agent)

07/12/07

(Date)

If signing on behalf of an entity:

Arlann McDonald

(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)

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