Florida Department of State

Division of Corporations Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H030001916763)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations.

Fax Number

: (850)205-0380

From:

Account Name : THE HOGAN LAW FIRM

Account Number: I20010000137 : (352)799-8423 Phone

Fax Number : (352)799-8294

CIVISION OF CORPORATIONS

REGISTERED AGENT CHANGE

PIERCE AND LYNN, INC.

Certificate of Status	1
Certified Copy	. 0
Page Count	01
Estimated Charge	\$43.75

(((H030001916763)))

May.12. 2003 4:53PM (((H03000191676 3)))

TRANSMITTAL LETTER

TO:	Amendment Section Division of Corporations
SUB.	TECT: PIERCE AND LYNN, INC. (Name of corporation)
	• • • •
DOC	UMENT NUMBER; P03000035232
The e	nclosed Statement of Change of Registered Office/Agent and fee are submitted for filing
Please	e return all correspondence concerning this matter to the following:
Deb	orah Hogan
	(Name of person)
The	Hogan Law Firm
	(Name of firm/company)
20 \$	outh Broad Streat
	(Address)
Brook	sville, FL 34601
	(City/state and zip code)
For fu	rther information concerning this matter, please call:
Deboi	rah Hogan at (352) 799-8423 (Name of person) (Area code & daytime telephone number)
	(Name of person) (Area code & daytime telephone number)
Enclo	sed is a \$35.00 check made payable to the Department of State.
Amen Divisi P.O. B	ag Address: drient Section on of Corporations ox 6327 assee, 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 607.056	0 <mark>2, 617.0502, 607.1508, or 617.1</mark> 3	508, Florida Statutes,		
this statement of		oration organized under the laws o	= "		
	in order to change its re	egistered office or registered agent	, or boin, in the state		
of Florida. 1. The name of	the corporation: Pierce and Lyn	n, Inc.	是 美		
	l office address: 475 Mariner Blv		5		
Spring Hill,	FL 34609	. <u> </u>	500		
3. The mailing	address (if different): 20 South B	Broad Street	70		
	, FL 34601	<u></u>	Br.		
4. Date of inco	poration/qualification: March	27, 2003 Document number:	P03000035232		
	d street address of the current requirement of State:	gistered agent and registered office	on file with the		
	Todd W. Vraspir				
	5327 Commercial Way, Suite A	101			
	Spring Hill, FL 34606				
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): Thomas S. Hogan, Jr.					
	20 South Broad Street	·- <u></u>			
(F.O. Box or personal mailbox NOT acceptable)					
	Brooksville, FL 34601				
The street addragent, as chang	ess of its registered office and the	ne street address of the business of	fice of its registered		
Such change wanthorized by t	as authorized by resolution duly be board, or the corporation has	adopted by its board of directors been notified in writing of the cha	or by an officer so inge.		
Samuel (Signature of an office	c, chairman or vice (Spilman of the ovard)	Sam und	122011 A		
I hereby accept I further agree performance of registered agen office address,	the appointment as registered a to comply with the provisions of my duites, and I am familiar wi t. Or, if this document is being I hereby confirm that the corpoi	ngent and agree to act in this capa fall statutes relative to the proper ith and accept the obligation of my filed merely to reflect a change in ration has been notified in writing	city, and complete position as the registered of this change,		
-73/10	ignature of Registered Agent)	5/12/03 (Date)			
If signing on belga		сыне			
	Typed or Printed Name)	(Capacity)	<u> </u>		
r.	4 4 4 THE TELL	T 1777 17 44 5 44 4			