## 103000046651

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(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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## **COVER LETTER**

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

TO:

Amendment Section Division of Corporations

## 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
1. The name of the corporation: TAMCORE INC.
2. The principal office address: 18598 LAKESIDE GAPDENS DR JUPITER, FL 33458
3. The mailing address (if different):
4. Date of incorporation/qualification: 4/23/03 Document number: P03000046651
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: SUSAN H TAMONY  18598 LAKESIDE GARDENS DE  TUPITER, FL 33458
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):  HUGH TAMONEY  18598 LAKESIDE GARDENS DR  (P.O. Box NOT acceptable)  TUPITER, FL 33458
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.  Such as A for the corporation has been notified in writing of the change.  Sughature of the officer of director)  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)  If signing on behalf of an entity;
AMCORE INC/HUGH M TAMONET

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (8/05)

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