## PO 3000097266

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## **COVER LETTER**

TO: Amendment Section Division of Corporations
SUBJECT: AlEmEl, Inc. (Name of Corporation)
DOCUMENT NUMBER: P03000097266
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:
John A. Anthony (Name of Contact Person)
AlEmEl, Inc. (Firm/Company)
201 N. Franklin Street, Suite 2200 (Address)
Tampa, FL 33602 (City/State and Zip Code)
For further information concerning this matter, please call:
John A. Anthony at (813) 273-5066  (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

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

statement of chair	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statute inge is submitted for a corporation organized under the laws of the State of Florida or to change its registered office or registered agent, or both, in the State of Florida	da		
	the corporation: AlEmEl, Inc.	ι.		
	office address: 201 N. Franklin Street, Suite 2200			
Tampa, FL				
3. The mailing ac	ddress (if different):			
4. Date of incorp	poration/qualification: 09/04/2003 Document number: P03000097	266	<u>.</u>	
	I street address of the current registered agent and registered office on file with the timent of State:			
	Capital Connection, Inc.			
	417 E. Virginia Street, Suite 1			
	Tallahassee, FL 32301-1283	TS.	05	
6. The name and (if changed):	CRETA	5 007 1	F	
	John A. Anthony	338 84 01	-	Ē
	201 N. Franklin Street, Suite 2200	FLOR	<b>⊋</b> ω	J
	(P.O. Box NOT acceptable)  Tampa, FL 33602	PACTE OF THE PACTE	19	
The street addre	ess of its registered office and the street address of the business office of its regi- be identical.	istered	agent	í,
Such change wa authorized by th	as authorized by resolution duly adopted by its board of directors or by an offic he board, or the corporation has been notified in writing of the change.	er so		
(Signatu	John A. Anthony, director  (Printed or typed name and title)			
I hereby accept	the appointment as registered agent and agree to act in this capacity to comply with the provisions of all statutes relative to the proper and complete all am familiar with and accept the obligation of my position as registered ageing filed merely to reflect a change in the registered office address, I hereby consider in writing of this change.	e perfoi int. Or infirm ti	rmane ; if th hat th	e is e
	19 Qual 2005			
	gnatule of Registered Agent)  Chalf of an entity:			
	Typed or Printed Name)			

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