## P03000103327

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## **COVER LETTER**

TO:	Amendment Section Division of Corporations				
SUBJI	CT: The Arrowood Companies, Inc. (Name of corporation)				
DOCU	MENT NUMBER: P03000103327				
The en	closed Statement of Change of Registered Office/Agent and fee are submitted for filing.				
Please	return all correspondence concerning this matter to the following:				
٠	Henry Arrowood (Name of contact person)				
	The Arrowood Companies				
	(Firm/Company)				
	P. O. Box 18103				
(Address)					
	Tampa, FL 33679				
	(City/state and zip code)				
For fur	ther information concerning this matter, please call:				
Henry .	Arrowood at (813 ) 340-6367  (Name of contact person) (Area code & daytime telephone number)				
	(Name of contact person) (Area code & daytime telephone number)				
Enclose	ed 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 409 E. Gaines Street Tallahassee, FL 32319				

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

statement of ch	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Stati ange is submitted for a corporation organized under the laws of the State of Flori er to change its registered office or registered agent, or both, in the State of Flori	ida		
	the corporation: The Arrowood Companies, Inc.	<i>.</i>		
<ol> <li>The name of</li> <li>The principal</li> </ol>	l office address: 3305 Henderson Boulevard - Tampa, FL 33140			
3. The mailing	address (if different):	<del> </del>	<del>, , , , , , , , , , , , , , , , , , , </del>	
4. Date of incom	poration/qualification; 09/19/2003 Document number: P030001033	327		
	d street address of the current registered agent and registered office on file with the trument of State:	ie		
	Henry Arrowood			
	3605 Henderson Boulevard	JA]	9	
	Tampa 33140	THAH	130 t	
6. The name an (if changed):	d street address of the new registered agent (if changed) and /or registered office	LAHASSEE, FI	-1 PH 4:	
	Hunry Arroweed (not changed)	401. KIS	т: (	
	3960 River Oak Lane	ADA ADA	2	
	(P.O. Box NOT acceptable)			
	Sebastian, Florida 32976			
The street addr as changed wil	ess of its registered office and the street address of the business office of its related its residentical.	gistered	agent	,
Such change wanthorized by	ras authorized by resolution duly adopted by its board of directors or by an off the corporation has been notified in writing of the change.	icer so		
#17	Henry Arrowood, President  (Printed or typed name and title)			
` P	t the appointment as registered agent and agree to act in this capacity.  It the appointment as registered agent and agree to act in this capacity.  It to comply with the provisions of all statutes relative to the proper and comple  It am familiar with and accept the obligation of my position as registered as  It is a registered as  It is the registered office address, I hereby it  It is been notified in writing of this change.		rmanc r, if thi that the	e s
(\$	ignature of Registered Agent) (Date)			
If signing on b	ehalf of an entity:			
	Typed or Printed Name)			

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