P03000/49435

(Requestor's Name)
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PICK-UP WAIT MAIL
(Dusiness Entity News)
(Business Entity Name)
(Document Number)
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400130976844

RAChange Neuro 6-12-08

06/09/08--01046--007 **35.00

COVER LETTER

TO: Amendment Section Division of Corporations			
SUBJECT: Dockmaster Investments, Inc. (Name of Corp.)	poration)		
DOCUMENT NUMBER: P03000149435			
The enclosed Statement of Change of Registered Office/A	Agent and fee are submitted for filing.		
Please return all correspondence concerning this matter to	o the following:		
Kim Hall			
(Name of Conta	act Person)		
Stodghill Law Firm Chartered (Firm/Company)			
PO Box 2431 (Address	55)		
Greenville, SC 29602 (City/State and	Zip Code)		
For further information concerning this matter, please cal	•		
-	at (864) 770-6166 (Area Code & Daytime Telephone Number)		
Enclosed is a \$35.00 check made payable to the Departm	ent 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 cha	nge is submitted for a corporation	517.0502, 607.1508, or 617.1508, Florida Statutes, this n organized under the laws of the State of FL registered agent, or both, in the State of Florida.	_
	he corporation: Dockmaster Inves	· ·	
2. The principal		adows Road Jacksonville, FL 32256*	
3. The mailing a	ddress (if different): same		
4. Date of incorp	poration/qualification: 12/10/2003	3 Document number: P03000149435	
	I street address of the current regis thent of State:	stered agent and registered office on file with the	
	Henderson Keasler Law Fi	rm, PA	
	7400 NW 193rd Street		
	Orange Lake, FL 32681	2008 SE TAIL	
6. The name and (if changed):	Orange Lake, FL 32681 I street address of the new registered agent (if changed) and /or registered office		FE
	FuseForm, Inc.		
	9838 Old Baymeadows R	load PS	
	(P.O. Box NOT a Jacksonville, FL 32256	acceptable)	60
	ess of its registered office and the	e street address of the business office of its registered age	nt,
Such change wanthorized by the	as authorized by resolution duly the board, or the corporation has t	adopted by its board of directors or by an officer so been notified in writing of the change.	
(Signalu	noof af officer or director)	Curtis Stodghill, President (Printed or typed name and title)	_
I hereby accept I further agree of my duties, an document is bei corporation has	the appointment as registered a to comply with the provisions of ad I am familiar with and accept ing filed merely to reflect a chan is been notified in writing of this c	gent and agree to act in this capacity. all statutes relative to the proper and complete performa the obligation of my position as registered agent. Or, if i ge in the registered office address, I hereby confirm that i change.	nce this the
The n	/ Reene	05/30/08	_
	gnature of Registered Agent)	(Date)	
If signing on be	chalf of an entity:		
	c. BY: Kevin Reese, Presider Typed or Printed Name)	<u>nt</u>	

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