P0300149955	
(Requestor's Name) (Address) (Address)	700077378887
(City/State/Zip/Phone #)	07/21/0601064022 **35.00
(Business Entity Name) (Document Number) ertified Copies Certificates of Status Special Instructions to Filing Officer:	FILED 2006 JUL 21 AM 9: 44 SEGRETARY OF STATE TALLAHASSEE, FLORIDA
Office Use Only	C. Coulliette JUL 3 1 2006

COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT MN

DOCUMENT NUMBER: <u>P03000149955</u>

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:



For further information concerning this matter, please call:

850) 222-17100 (Area Code & Daytime Telephone Number) ontact Person)

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

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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

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 ______ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Desmond + Maceluch, P.A.
2. The principal office address: 1210 E. Park Ave, Tallahassee, FZ 32301
3. The mailing address (if different):
4. Date of incorporation/qualification: 12-11-03 Document number: P03000149955
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: Seen T. Desmond Desmond & Maceluch, P.A. 249 East Sixth Avenue Tallahassee, FL 32303 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): Sean T. Desmond Desmond & Maceluch, P.A. 1210 East Park Avenue (P.O. Box NOT acceptable) Tallahassee, FL 32301

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.

President n

(Signature of an officer or director

typed name and title

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:

11. 1 o rijenskov i se

(Typed or Printed Name)

41.7.1

* * * FILING FEE: \$35.00 *

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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