P0400039042

(Re	equestor's Name)	
(A	ddress)	
(A	ddress)	
(C	ity/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(В	usiness Entity Nan	ne)
(D	ocument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



400039181884

07/20/04--01022--003 **35.00

OL JUL 20 AM 10: 12
SECRETARS EE. FLORIDA

PO chy PRE/s

TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Investor Resources Inc. (Name of corporation)
DOCUMENT NUMBER: 704 0000 390 42
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:
Daniel M. Copeland (Name of person)
Daniel M. Copeland attorney at Law P.A. (Name of firm/company)
. 9310 Old Kings Road South, Bldg 15 - Suite 1.
Jacksonville Fl 32257 (City/state/and zip code)
For further information concerning this matter, please call:
(Name of person) at (904) 482-0616 (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
409 E. Gaines Street
Tallahassee, FL 32399

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 Florida in order
change is submitted for a corporation organized under the laws of the State of <u>FOrt da</u> in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: Investor Resources Inc
2. The principal office address: 9310 Old Kings Rd So - Bldg 15 - Suite 1501 Tackonville, 71 32257
Jackonville, fl 32257
3. The mailing address (if different):
4. Date of incorporation/qualification: $O^2/23/3004$ Document number: $P04000039042$
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
Daniel M. Copeland
Daniel M. Copeland 4686 Sunbeam Rd - Suite 216
Jax Fl 32257 = 50 8
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Daniel M. Copeland Fig. 3 Ground Gr
(P.O. Boy or personal mailbox NOT acceptable)
Jacksonville Fl 32257
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.
Daniel M. Capeland
(Signature of an office or 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) 07/19/04 (Date)
If signing on behalf of an entity:
(Typed or Printed Name) (Capacity)

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