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CORPORATION SVC CO

NO 221 P 1

P04000098681

Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 205-0380

From:

Account Name : CORPORATION SERVICE COMPANY
Account Number : I20000000195
Phone : (850) 521-1000
Fax Number : (850) 558-1575

REGISTERED AGENT CHANGE

SUNCOAST NOTARY, INC.

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$35.00

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CORPORATION SVC CO

NO. 221
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**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 to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: SUNCOAST NOTARY, INC.

2. The principal office address: 5224 SOUTH PURITAN AVENUE TAMPA, FL 33611 US

3. The mailing address (if different): _____

4. Date of incorporation/qualification: 06/29/2004 Document number: P04000098681

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

Corporation Service Company

1201 Hays Street

Tallahassee, FL 32301

6. The name and street address of the new registered agent (if changed) and/or registered office (if changed):

Scott Schroeder-Jorgensen

5224 S. Puritan Avenue

(P.O. Box NOT acceptable)

Tampa, FL 33611

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.

Scott Schroeder-Jorgensen

(Signature of an officer or director)

(Printed or 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]
(Signature of Registered Agent)

8/9/04
(Date)

If signing on behalf of an entity:

Scott Schroeder-Jorgensen
(Typed or Printed Name)

*** 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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