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COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Kerry Lew Diavidson PA (Name of corporation)
DOCUMENT NUMBER: POYOOI 49009
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:
Kelly Lew Davidson Pa (Name of contact person) Kelly Lew Davidson Pa (Firm/Company) 3491 5TH AVE NW (Address)
MAPIES FL 34120 (City/state and zip code)
For further information concerning this matter, please call:
(Name of contact person) at (239) 248 - 0817 (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

1. The name of the corporation:	Kelly	LEE Da	4,030,0	<u> </u>		
2. The principal office address:	3491 574	AVE	NW	1	95	
	NAPIES, F	L 3412)	100	7	- 3
3. The mailing address (if different)):	JANK	····- <u>·</u>			
4. Date of incorporation/qualification	on: 10/28/04	Document	i number:	0400014	9 00 9	
5. The name and street address of the		gent and register	red office on	file with the	08/	
Florida Department of State:	. `	1			7	
	1 (1) AU	idson				
<u> </u>	12TH A	VE NE				
XA	P165 fr	34120				
6. The name and street address of the (if changed):	ne new registered age	nt (if changed) a	nd /or regist	ered office		
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