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COVER LETTER

| Division of Corporations | | | |
|---|---|--|--|
| SUBJECT: Jamie Allen, P.A. (Name of Corporation) | | | |
| DOCUMENT NUMBER: PO 500000266 | | | |
| 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: | | | |
| | 5 | | |
| Tamia Alla | | | |
| James Allen (Name of Contact Person | <u>n)</u> | | |
| | - | | |
| Janie Allen P. A. (Firm/Company) | | | |
| (Firm/Company) | | | |
| 2806 Oak SY. | | | |
| () | | | |
| Jack conville Fl 322 | ~ · · · · · · · · · · · · · · · · · · · | | |
| Jack sonville FL 322 (City/State and Zip Code | | | |
| For further information concerning this matter, please call: | | | |
| Tau's Alla | ((1) 30/0 | | |
| Name of Contact Person) at (90) | a Code & Daytime Telephone Number) | | |
| | | | |
| Enclosed is a \$35.00 check made payable to the Department of State. | | | |
| | | | |
| Mailing Address: S Amendment Section | Amendment Section | | |
| _ | Division of Corporations | | |
| P.O. Box 6327 | Clifton Building | | |

2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314

TO:

Amendment Section

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: Jamie Allen, P.A. |
| 2. The principal office address: 2806 Oak Sy. Jacksonville, FL 32205 |
| 3. The mailing address (if different): Same |
| 4. Date of incorporation/qualification: 1/03 05 Document number: Po 500000 266 |
| 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 Mays St. |
| Tallahassee FL 32301 PF 8 |
| 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): Jamie Allen Fig. 19 |
| Jamie Allen Fig 2 |
| 11362 San Jose Blud Suite 18 P. B. |
| Jacksonville, FL 32223 |
| 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. |
| (Signature of an officer or director) (Printed or typed name and lifte) |
| 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) (Date) |
| If signing on behalf of an entity: |
| Jamie A. Allen (Typed or Printed Name) |

Make Checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 CR2E045 (8/05)

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