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COVER LETTER

Division of Corporations
SUBJECT: Patrick J. M. Gooder, P. A. (Name of Corporation)
DOCUMENT NUMBER:
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:
Patrick J. M. Groder (Name of Contact Person)
Deue Brane Rec 16. Inc. (Firm/Company)
195 International Play. Soute 101 (Address)
Hec. thraw FL 32746 (City/State and Zip Code)
For further information concerning this matter, please call:
Petrick M'600d1 at (407) 920-4079 (Name of Contact Person) (Area Code & Daytime Telephone Number)
(Name of Contact Person) (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 Street Address: Amendment Section Division of Corporations Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

Tallahassee, FL 32314

CR2E045 (8/05)

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

gursuant 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: Petrick I McGroder, & A
1. The name of the corporation: Petrick I McGroder, & H. 2. The principal office address: 195 International Phuy Suite 101
Hecthran, FL 32746
3. The mailing address (if different):
4. Date of incorporation/qualification: 2-8-2005 Document number: Po500020894
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
Corporation Senice Company
1201 Hays Street
Tallahassre, F1 32301
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Patrick J. m'broder
(P.O. Box NOT acceptable)
Hec throw. FL 32746
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) Patrick J. M. 610 der - President (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 of Registered Agent) (Date)
If signing on behalf of an entity:
Clymet or British Name)

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

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