POSO00064331

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
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COVER LETTER

	mendment Section vision of Corporations
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SUBJECT	Florida Retail Capital, Inc.
SC DO LC	(Name of corporation)
DOCUMI	ENT NUMBER: P05000064331
The enclos	sed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please retu	rn all correspondence concerning this matter to the following:
	Scott Porter
	(Name of contact person)
	Florida Retail Capital, Inc.
	(Firm/Company)
	2130 Keaton Chase Drive(Address)
	Orange Park, FL 32003 (City/state and zip code)
For further	r information concerning this matter, please call:
Scott Porte	
	(Name of contact person) (Area code & daytime telephone number)
Enclosed i	s a \$35.00 check made payable to the Department of State.
	Mailing Address: Amendment Section Division of Corporations Street Address: Amendment Section Division of Corporations Amendment Section Division of Corporations

P.O. Box 6327 Tallahassee, FL 32314

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 Statement of change is submitted for a corporation organized under the laws of the State of Floring in order to change its registered office or registered agent, or both, in the State of Floring	orida	is	******
1. The name of the corporation: Florida Retail Capital, Inc.			
2. The principal office address: 2130 Keaton Chase Drive - Orange Park, FL 32003			
3. The mailing address (if different):			
4. Date of incorporation/qualification: 5/02/05 Document number: P05000064	4331		
5. The name and street address of the current registered agent and registered office on file with a Florida Department of State:	the		
Scott Porter			
2130 Keaton Chase Drive	 :	_	
Orange Park, FL 32003	ALLA OLLA	35 ≥	-171
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):	کے لیل	N-6 A	
Rogers Towers c/o BJ Ibach	F ST	55 ¥	O
1301 Riverplace Boulevard, Suite 1500	RATE	=	
(P.O. Box NOT acceptable)	حلا		
Jacksonville, FL 32207			
The street address of its registered office and the street address of the business office of its ras changed will be identical.	registere	ed age	ent,
Such change was authorized by resolution duly adopted by its board of directors or by an of authorized by the board, or the corporation has been notified in writing of the change.	fficer so)	
(Signature of an officer of effector) Stoff DORTEL - PA	<u>NESI (</u>	m	7
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 compl of my duties, and I am familiar with and accept the obligation of my position as registered a document is being filed merely to reflect a change in the registered office address, I hereby of corporation has been notified in writing of this change.	lete perj agent. (confirm	forma Or, if that	ince this the
(Date)			_
(Date) If signing on behalf of an entity:			
(Typed or Printed Name)			