Florida Department of State

Division of Corporations Public Access System

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To:

Division of Corporations

: (850)617-6380 Fax Number

From:

: CORPDIRECT AGENTS, INC. Account Name

Account Number : 110450000714 : (850)222-1173 Phone

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REGISTERED AGENT CHANGE

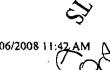
P.A. WELLS & CO., INC.

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Stat nge is submitted for a corporation organized under the laws of the State of Flor r to change its registered office or registered agent, or both, in the State of Flor	orida	·	
1. The name of t	he corporation: P.A. Wells & Co., Inc.			
	office address: 600 Sagamore Road, Fort Lauderdale, FL 33301	·		
3. The mailing a	ddress (if different):			
4. Date of incorp	poration/qualification: 5/6/2005 Document number: P0500000	56978		
	street address of the current registered agent and registered office on file with timent of State:	the		
	Patrick G. Kelley			
	1401 East Las Olas Boulevard			
	Fort Lauderdale, FL 33301	Ho	2 G	.
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered office			77
	CorpDirect Agents, Inc.		9	
	515 East Park Avenue		PH	3
	(P.O. Box NOT acceptable) Tallahassee, FL 32301	調点	<i>ج</i>	
The street address changed will	ess of its registered office and the street address of the business office of its be identical.	registere	d ager	n t,
Such change wanthorized by t	as authorized by resolution duly adopted by its board of directors or by an o he board, or the corporation has been notified in writing of the change.	fficer so	1	
Bay	Barbara S. Wells, Presider (Printed or typed name and but	nt e)		_
I hereby accept further agree of my duties, and document is be corporation ha	the appointment as registered agent and agree to act in this capacity, to comply with the provisions of all statutes relative to the proper and computed I am familiar with and accept the obligation of my position as registered ing filed merely to reflect a change in the registered office address, I hereby been notified in writing of this change. August 6, 2008	olete per agent. ' Confirn	formai Or, if i i that i	nce his the
	enalf of an entity:			_
	Tadlock, Assistant Sec. (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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