## 105000104902

(Red	questor's Name)	
(Add	tress)	
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(Doc	cument Number)	·
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T. Roberts OCT 0 2 2006 T. Roldingberger 2007 2008 2006

## **COVER LETTER**

TO: Amendment Section Division of Corporations	
SUBJECT: Blountstown Diuss Inc. (Name of Corporation)	- :
DOCUMENT NUMBER: P05000104902	بين المعاد الماد
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:	
Tohanna Plummer (Name of Contact Person)	-
Blountstown Drugs, Inc.	
20370 Central Ave. W.	
Blown+stown, FL 32429 (City/State and Zip Code)	19 To au
For further information concerning this matter, please call:	
(Name of Contact Person) at (\$50) 674-ZZZZ	nher\
(Mand of Contact Leison) (Mea Code & Daytime Telephone Num	moer)

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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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

statement of change is submit	sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this tted for a corporation organized under the laws of the State ofts registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation	on: Blountstown Drugs, Inc
2. The principal office addres	Blountstain, FL 32424
3. The mailing address (if dif	ferent): By 100-45-40-144
4. Date of incorporation/qual	ification: 7/28/2005 Document number: P0500010490Z
5. The name and street addre Florida Department of Stat	
	Belinda T. trance
····	103 East Tennessee, St.
	Tallahosee, FL 32308
6. The name and street addre (if changed):	ss of the new registered agent (if changed) and /or registered office  Jon Mark Plummer  100  100  100  100  100  100  100  1
	Blountstown, FL 32424
The street address of its reg as changed will be identical	istered office and the street address of the business office of its registered agent,
Such change was authorized authorized by the board, or (Signature of an officer	d by resolution duly adopted by its board of directors or by an officer so the corporation has been notified in writing of the change.  Johanna V. Plummer Secretarior director)  (Printed or typed name and title)
I further agree to comply w of my duties, and I am fami document is being filed mer	ment as registered agent and agree to act in this capacity. ith the provisions of all statutes relative to the proper and complete performance liar with and accept the obligation of my position as registered agent. Or, if this rely to reflect a change in the registered office address, I hereby confirm that the ed in writing of this change.
Signature of Regis	$\frac{9-27-06}{\text{(Date)}}$
If signing on behalf of an e	······································
Jon Mark Plu (Typed or Printed	Mm &

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (8/05)