

Division of Corporations

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Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 617-6380

From:

Account Name : NATIONAL REGISTERED AGENTS, INC.
Account Number : I20030000062
Phone : (609) 716-0300
Fax Number : (609) 716-0820

FILED
2009 JUN -3 PM 3:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

REGISTERED AGENT CHANGE

AFFORDABLE DENTURES - TAMPA, P.A.

Certificate of Status	0
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Page Count	01
Estimated Charge	\$35.00

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Corporate Filing Menu

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CH090001189503)

**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: Affordable Dentures - Tampa, P.A.
2. The principal office address: 234 Bearss Avenue, Tampa, FL 33613
3. The mailing address (if different): PO Box 1042, Kinston, NC 28503
4. Date of incorporation/qualification: 10/05/2005 Document number: P05000136378
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

NRAI Services, Inc.526 East Park AvenueTallahassee FL 32301

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

NRAI Services, Inc.2731 Executive Park Drive, Suite 4(P.O. Box NOT acceptable)Weston, FL 33331

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 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.

Zulma M. Howarth(Signature of Registered Agent)5-12-09(Date)

If signing on behalf of an entity:

Zulma M. Howarth, Asst. Secretary(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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May 12, 2009

FLORIDA DEPARTMENT OF STATE
Division of Corporations

FAXED
5/12/09

AFFORDABLE DENTURES - TAMPA, P.A.
POB 1042
KINSTON, NC 28503

SUBJECT: AFFORDABLE DENTURES - TAMPA, P.A.
REF: P05000136378

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The registered agent must sign the document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6925.

Teresa Brown
Regulatory Specialist II

FAX Aud. #: H09000118950
Letter Number: 509A00015068

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