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To:

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

Sount Name : BUSH ROSS, P.A.

Celeste Perrino
(999999-9999)

Figure : (813) 224-9255
Figure : (813) 223-9620

REGISTERED AGENT CHANGE

GOUDIE & KOHN, P.A.

Certificate of Status	0
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COVER LETTER

To: Amendment Section Division of Corporatio	ns			
SUBJECT:	Goudie & Ko	hn. P.A	L .	
<u> </u>	(Name of Con			
DOCUMENT NUMBER:	P0600004203	P06000042038		
The enclosed Statement of Ch Please return all corresponden				
	Celeste Pe	arino		
	(Name of Cor		rson)	
•	Bush Ros	ee 12 A		
	(Firm/Co			
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	1801 North H (Addr		ı Ayen	ue
	`	.,		
	Tampa Fl			
	(City/State and	Zip Co	ode)	
For further information concer	ming this matter, ple	ase call	:	
Celeste Pertino	at (_	813	_)	204-6425
(Name of Contact Pers		(Area	Codes	Daytime Telephone Number)
Enclosed is a \$35.00 check ma	ide payable to the Do	partme	nt of S	tate.
	Address:		Stree	t Address:
	nent Section			adment Section
	of Corporations			ion of Corporations
P.O. Bo				Executive Center Circle
Tallahassee, FL 32314		Tallahassee, FL 32301		

CR2E045 (8/05)

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

Pursuant to the provisions of sections 607.0502, 617.0502, 617.1508, or 617.1508, Florida Statides, 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: Gondie & Kohn, P.A.
2. The principal office address: 400 North Ashley Dr., Ste 2180, Tampa, FL 33602
3. The mailing address (if different): 400 North Ashley Dr., Ste. 2180, Tampa, FL 33602
4. Date of incorporation/qualification: 03/22/2006 Document number: P06000042038
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
Karen S. Cox
220 S. Franklin Street
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Bush Ross Registered Agent Services, LLC
1801 North Highland Ayonuc
Tampa, Florida 33602
The street address of its registered office and the street address of the business office of its registered again, 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 concention has been notified in writing of the change.
(Printed of 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. Of, if this document is being filled 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) (Signature of Registered Agent) (Oute)
(1 yped or France 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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