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## **COVER LETTER**

TO: Amendment Section Division of Corporations
SUBJECT: Audrey A. Banks, Inc. (Name of Corporation)
DOCUMENT NUMBER: POLOCOO 83740
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:
Sonya K. Daws (Name of Contact Person)
Messer, Caparello + Self, P.A. (Firm/Company)
P.O. Box 15579 (Address)
Tallahassel, FL 32317 (City/State and Zip Code)
For further information concerning this matter, please call:
Sonya Daws at (850) lour 5246 (Name of Contact Person) at (850) lour 5246 (Area Code & Daytime Telephone Number)
Enclosed is a \$35.00 check made payable to the Department of State

33.00 eneck made payable to the Bepartment of St

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

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
in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: Audrey A. Banks, Inc.
2. The principal office address: 1588 Marion (our t
Tallahussee, FL 32303
3. The mailing address (if different): Same
4. Date of incorporation/qualification: 10/20/2000 Document number: P01000083740
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
Sonya K. Daws, Esq.  3116 Capital Circle NE, Suite 5
3116 Capital Circle NE, Suite 5
Tallahassee FL 32308
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Sonya K. Daws, Esq.  2618 Centennial Place
2618 Centennial Place 5
Tallahusser, Fl 32308
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.
Suprature of an officer or directors  Authority Denks (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.
(Date)
If signing on behalf of an entity:
Ayped or Printed Name)

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

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