## DO 6000/1602

(Requestor's Name)	
(Address)	900113425
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	01/04/080101401
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
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## **COVER LETTER**

Division of Corporations	
SUBJECT: Exploreos, Inc. (Name of Control of	moration)
, (Name of Con	polition
DOCUMENT NUMBER: P06000146020	
The enclosed Statement of Change of Registered Office/	Agent and fee are submitted for filing.
Please return all correspondence concerning this matter t	to the following:
W. Graham Whit	te, Esquire
(Name of Cont	
Winderweedle, Haines, W	
(Firm/Con	npany)
N.	
329 Park Avenue No	rth, Second Floor
(Addre	ss)
Winter Park, F	FL 32789
(City/State and	Zip Code)
For further information concerning this matter, please ca	II:
Vanessa J. DiSimone	at ( 407 ) 423-4246
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed is a \$35.00 check made payable to the Departm	nent of State.
Mailing Address:	Street Address:
Mailing Address: Amendment Section	Amendment Section
Division of Corporations	Division of Corporations
P.O. Box 6327	Clifton Building
Tallahassee, FL 32314	2661 Executive Center Circle

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

statement of char	rovisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this nge 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	he corporation: Exploreos, Inc.
2. The principal	office address: 2607 S. Woodland Boulevard, #123, Deland, FL 32720
3. The mailing ac	Idress (if different):
4. Date of incorp	oration/qualification: 11/21/06 Document number: P06000146020
5. The name and Florida Depart	street address of the current registered agent and registered office on file with the ment of State:
	Winderweedle, Haines, Ward & Woodman, P.A.
	Bank of America Center, 390 N. Orange Avenue
	Orlando, FL 32801
6. The name and (if changed):	street address of the new registered agent (if changed) and /or registered office
	WHWW, Inc.
	390 N. Orange Avenue, 15th Floor
	(P.O. Box NOT acceptable)
	Orlando, FL 32801
The street address changed will	ss of its registered office and the street address of the business office of its registered agent, be identical.
Such change wa authorized by th	s authorized by resolution duly adopted by its board of directors or by an officer so e board, or the corporation has been notified in writing of the change.
5//	Edwin J. Stanley, Vice President
. (bramaty	(Printed or typed name and title)
Thereby accept if further agree to of my duties, and document is bein corporation has	the appointment as registered agent and agree to act in this capacity. o comply with the provisions of all statutes relative to the proper and complete performance it I am familiar with and accept the obligation of my position as registered agent. Or, if this ng filed merely to reflect a change in the registered office address, I hereby confirm that the been notified in writing of this change.
M. J.	nature of Registered Agent) (Date)
If signing on bel	half of an entity:
W. Graham Whi	te, Vice President of WHWW, Inc.
<u> </u>	ypod 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 \* \* \*