

P07000011565

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

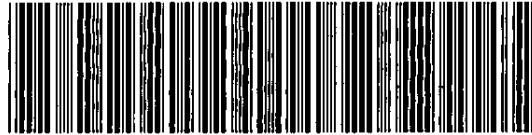
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

R.A.

TB

JUL 15 2009

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: EDD HOLDER AND ASSOCIATES, INC.
Name of Corporation

DOCUMENT NUMBER: P07000011565

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:

Suzanne Smith
Name of Contact Person

Edd Holder & Assoc
Firm/Company

11312 Dead River Rd.
Address

Tallahassee FL 32314
City/State and Zip Code

SUZANNE@EddHolder.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Suzanne Smith at (352) 343.0122
Name of Contact Person Area Code & Daytime Telephone Number

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**

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: Edd Holder and Associates, Inc.
2. The principal office address: 11312 Dead River Rd
Tavares FL 32778
3. The mailing address (if different): same
4. Date of incorporation/qualification: 1-18-2007 Document number: P07000011565
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

Charles Edd Holder, III
1224 N. Donnelly, St.
Mt. Dora, FL 32757

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

(Same) Charles Edd Holder, III
11312 Dead River Rd
Tavares FL 32778

P.O. Box NOT acceptable

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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]
Signature of an officer or director

Charles Edd Holder, III
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.

[Signature]
Signature of Registered Agent

JUNE 25, 2009
Date

If signing on behalf of an entity:

Charles Edd Holder, III
Typed or Printed Name

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