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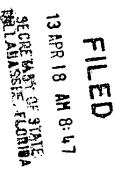
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APR 2 4 Z013 T. ROBERTS



CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Vera M. Norris

Date: April 16, 2013

Order#: 606298/020

Re: NAPLES CAPITAL ADVISORS, INC.

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$35.00.

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Return Regular Mail in the enclosed envelope.

Attn:Vera M. Norris c/o Corporation Service Company 2711 Centerville Road, Suite 400 Wilmington, DE 19808

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

INCA.XCOA



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

statement of cha	inge is submitted for a corporation organ	2, 607.1508, or 617.1508, Florida Statutes, this ized under the laws of the State of Florida cred agent, or both, in the State of Florida.	
1. The name of	the corporation: NAPLES CAPITAL ADVI	SORS, INC.	
	office address:et North, Suite 100, Naples, FL 34102		
3. The mailing a	ddress (if different):		
4. Date of incorp	poration/qualification: 03/08/2007	Document number: P07000030183	
	d street address of the current registered agetment of State: (If resigned, enter resigne		
	Paul J. Marinelli		
	599 9th Street North Suite 100		
	Naples, FL 34102		_
6. The name and (if changed):	l street address of the new registered agen	at (if changed) and /or registered office	
	Corporation Service Company		
	1201 Hays Street		k
	P.O. Box NOT Tallahassee, FL 32301	acceptable	
The street address changed will	ess of its registered office and the street a be identical.	address of the business office of its registered agent,	
Such change was authorized by the	as authorized by resolution duly adopted ne board, or the corporation has been not	by its board of directors or by an officer so ified in writing of the change.	
Signatur	ze of ah officer or director	Dona Priebe, Vice President Printed or typed name and title	
I hereby accept I further agree performance of agent. Or, if th hereby confirm	the appointment as registered agent and to comply with the provisions of all statu my duties, and I am familiar with and ac	d agree to act in this capacity. He agree to act in the proper and complete Except the obligation of my position as registered Except the obligation of my position as registered Except the obligation of my position and the complex of the complex of the capacity of the complex	
By:	Personal Company of Registered Agenti	April 10, 2013 Date	
	half of an entity:	Date	
Sylvia Queppet			
T	yped or Printed Name		

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