## P07000038814

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Office Use Only



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SECRETARY OF STATE ALLAHASSEE, FLORING

Richard

## **COVER LETTER**

TO: Amendment Se Division of Co	ection rporations	
SUBJECT: Old Sou	thern Bancorp, Inc. (Name of Co	orporation)
DOCUMENT NUMB	ER: P07000038814	
The enclosed Statemen	nt of Change of Registered Office	Agent and fee are submitted for filing.
Please return all corres	pondence concerning this matter	to the following:
Am	anda Kuzicki	
<u></u>	(Name of Cor	ntact Person)
1611	Basslavan Starra Ora	atain 9 Courses D.A
Killy	gore, Pearlman, Stamp, Orr Firm/Co	
<u>2 Sc</u>	outh Orange Avenue, 5th Flo (Add	
Orla	ndo, Florida 32801	
	(City/State ar	id Zip Code)
For further information	n concerning this matter, please o	call:
Amanda Kuzicki (Name	of Contact Person)	at ( 407 ) 425-1020 (Area Code & Daytime Telephone Number)
Enclosed is a \$35.00 c	heck made payable to the Depart	ment 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

CR2E045 (8/05)

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

. . . **!** 

	ant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this sent 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: Old Southern Bancorp, Inc.	
	principal office address: 250 North Orange Avenue, Orlando, Florida 32801-1819	
— 3. The	mailing address (if different):	•
- 4. Dat	te of incorporation/qualification: 3/26/2007 Document number: P07000038814	
	e name and street address of the current registered agent and registered office on file with the rida Department of State:	
	John G. Squires	
	250 North Orange Avenue	
	Orlando Florida 32801-1819	<u> </u>
	e name and street address of the new registered agent (if changed) and /or registered office changed):  Killgore, Pearlman, Stamp, Ornstein & Squires, P.A.	TEO
	2 South Orange Avenue, 5th Floor	
	(P.O. Box NOT acceptable)	
	Orlando, Florida 32801	
The s	treet address of its registered office and the street address of the business office of its registered agent, anged will be identical.	
Such autho	change was authorized by resolution duly adopted by its board of directors or by an officer so rized by the board, or the corporation has been notified in writing of the change.	
4	hun Sames Binford GREN Saures Binford Directo	R
there I furth of my docum corpo	(Printed of typed name and tills)  when accept the appointment as registered agent and agree to act in this capacity. The agree to comply with the provisions of all statutes relative to the proper and complete performance auties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this ment is being filed merely to reflect a change in the registered affice address, I hereby confirm that the pration has been notified in writing of this change.	· · · · · · · · · · · · · · · · · · ·
	(Signature of Registered Agent) (Date)	
If sign	ning on behaif of an entity:	
Mart	in F. Stamp, Vice President	
	(Typed or Printed 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 CR2E045 (8'05)