## PO 7000083451

(Re	equestor's Name)				
(Address)					
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(Ci	ty/State/Zip/Phone #	()			
PICK-UP	☐ WAIT	MAIL			
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(Bu	isiness Entity Name	)			
(Do	ocument Number)				
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Certified Copies Certificates of Status					
Special Instructions to	Filing Officer:				
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## **COVER LETTER**

TO: Amendment Section Division of Corporation	s			•
SUBJECT:	Byron B. Ho	owell, P.,	<b>A</b> .	
DOCUMENT NUMBER:	P0	7000083	3651	
The enclosed Statement of Chan	ge of Registered Of	fice/Agent a	nd fee are	submitted for filing.
Please return all correspondence	concerning this mat	tter to the fo	llowing:	
	Byron Name of 0	B. Howell Contact Pers	on	***
		Howell, P Company	.A.	····
***************************************	10750 A	yrshire Dri ddress	ve	
	Tampa City/State	, FL 33626 and Zip Co	6 de	<del></del>
E-mail addr	bbhowell@bi	bhowellpa r future ann	.com iual report	notification)
For further information concerni	ng this matter, pleas	e call:		
Byron B. Ho	owell	at (	813	205-6314

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

statement of cha	provisions of sections 607 inge is submitted for a cor er to change its registered (	poration organized	l under the laws of the Stat	te of Florida			
	the corporation: Byron office address: 10750 A						
3. The mailing a	address (if different): San	ne					
4. Date of incorp	poration/qualification:	07/24/2007	Document number:	P07000083651			
	d street address of the curre rtment of State: (If resigne	-	and registered office on f	ile with the			
	Byron B. Howell			·			
	341 4th Avenue South						
	St. Petersburg, FL 3	33701		-			
6. The name and (if changed):	d street address of the new	registered agent (it	f changed) and /or registen	ed office			
	Byron B. Howell	· · · · · · · · · · · · · · · · · · ·					
	10750 Ayrshire Driv	<del>-</del>					
P.O. Box NOT acceptable  Tampa, FL 33626							
The street addre	ess of its registered office	and the street add	ress of the business office	e of its registered agent,			
Such change wa	as authorized by resolutione board, or the corporation	n duly adopted by	its board of directors or ed in writing of the chang	by an officer so			
loky	re of an officer or director		Byron B. Howe	ell, President			
I further agree to of my duties, an document is bei	the appointment as regis to comply with the provis ad I am familiar with and ng filed merely to reflect s been notified in writing	ions of all statutes accept the obligat a change in the re	gree to act in this capacit relative to the proper an ion of my position as reg gistered office address, I	y. d complete performance istered agent. Or, if this hereby confirm that the			
- BUG	M Mould nature of Registered Agent		November 2	22, 2011			
_	half of an entity:		2-44				
	vned or Printed Name						

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