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## **COVER LETTER**

	Amendment Section Division of Corporations				
SUBJE	CT: Carol L. Hill, P.A. (Name of Corporation)	on)			
DOCU	MENT NUMBER: P08000052704				
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:					
	Carol L. Hill				
(Name of Contact Person)					
	Coroll Hill B A				
	Carol L. Hill, P.A. (Firm/Company)				
	12 Blue Jordan Road				
	(Address)	<del></del>			
	Frostproof, FL 33843				
(City/State and Zip Code)					
For furth	ner information concerning this matter, please call:				
Carol H	ill at (8 (Name of Contact Person) at (8	63 ) 635-5963 Area Code & Daytime Telephone Number)			
Enclosed is a \$35.00 check made payable to the Department of State.					
	Mailing Address: Amendment Section	Street Address: Amendment Section			
	Division of Corporations P.O. Box 6327	Division of Corporations Clifton Building			
	Tallahassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301			

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

statement of ch	provisions of sections 607.0502, 617.0502 ange is submitted for a corporation organi. er to change its registered office or register	zed under the laws of the State o	f Florida	
	the corporation: Carol L. Hill, P.A.		,	
	office address: 12 Blue Jordan Road			
3. The mailing	address (if different): s/a			
4. Date of incor	poration/qualification: May 28, 2008	Document number: P0800	00052704	
	d street address of the current registered ag rtment of State:	gent and registered office on file	with the	
	Spiegel & Utrera, P.A.			
	1840 SW 22nd Street, 4th Floor	•	2008 TAL	
	Miami, FL 33145		ARE TO	
6. The name an (if changed):	d street address of the new registered agent	t (if changed) and /or registered	2008 JUN -2 AM 11: 53 SECRETARY OF STATE SECRETARY OF STATE OF STATE OF STATE OF STATE OF STATE OF STATE	
	Carol L. Hill		ORIDET : 53	
	12 Blue Jordan Road		P	
	(P.O. Box NOT acceptable) Frostproof, FL 33843			
as changed wil	ress of its registered office and the street at l be identical.			
Such change wanthorized by	as authorized by resolution duly adopted the board, or the corporation has been not	by its board of directors or by tified in writing of the change.	an officer so	
Ca	ture of an officer of director)	Carol L. Hill, President	and title)	
I hereby accep I further agree of my duties, a document is be corporation ha	t the appointment as registered agent and to comply with the provisions of all statund I am familiar with and accept the obling filed merely to reflect a change in the is been notified in writing of this change.	d agree to act in this capacity. Ites relative to the proper and c gation of my position as registe e registered office address, I he	complete performance ered agent. Or, if this reby confirm that the	
(a)	ignature of Registered Agent)	Carol L. Hill 5/	30/08	
If signing on b	ehalf of an entity:			
Carol L. Hill				
	(Typed or Printed Name)			

Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

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