

P080.00095628

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

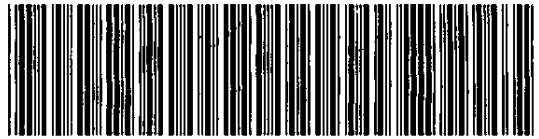
(Business Entity Name)

(Document Number)

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 19, 2009

JOHN BRUNSON
JOHN MORGAN BRUNSON, ESQ.
4250 CENTRAL AVENUE
ST. PETERSBURG, FL 33711

SUBJECT: P2T, INC.
Ref. Number: P08000095628

We have received your document for P2T, INC., however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$35.00.

To change the registered agent or registered office, or both, the enclosed form should be completed and returned to this office with a filing fee of \$35.

* THE NEW AGENTS NAME AND ADDRESS MUST APPEAR IN #5. THE NEW AGENT MUST SIGN ACCEPTING THE DESIGNATION BELOW. #5 SAYS "CURRENT REGISTERED AGENT" WE ARE NOT CHANGING R.A. - ONLY THE ADDRESS.
If you have any questions concerning the filing of your document, please call (850) 245-6880.

Karen Gibson
Document Specialist Supervisor

Letter Number: 109A00033384

* SEE ARTICLES ATTACHED

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: P2T, Inc.

2. The principal office address: 1211 North Westshore Boulevard, Suite 501, Tampa, FL 33607

3. The mailing address (if different): _____

4. Date of incorporation/qualification: 10/2302008 Document number: P08000095628

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)

John M. Brunson, Esquire

4250 Central Avenue

St. Petersburg, FL 33711

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

P.O. Box NOT acceptable

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 of an officer or director

Art Gisonni, President

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 of Registered Agent

Date

If signing on behalf of an entity:

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)

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