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| (Requestor's Name) | _ |
|---|---|
| (Address) | _ |
| (Address) | |
| (City/State/Zip/Phone #) | _ |
| PICK-UP WAIT MAIL | |
| (Business Entity Name) | |
| (Document Number) | |
| Certified Copies Certificates of Status _ · | _ |
| Special Instructions to Filing Officer: | |
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Office Use Only



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COVER LETTER

| Division of Corporations | | | |
|---|---------------------------------|--|--|
| SUBJECT: DBR ADMINISTRATION SERVICESINC Name of Corporation | | | |
| DOCUMENT NUMBER: POGOOO LOHOO. | | | |
| 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: | | | |
| | | | |
| BARBARA RUDDOCK Name of Contact Person | | | |
| Name of Contact Leison | | | |
| DBR ADMINISTRATION SERVICES INC | | | |
| Firm/Company | | | |
| | | | |
| 7456 ROXYE LANE Address | | | |
| | | | |
| SARASOTA, FL34240 | | | |
| City/State and Zip Code | | | |
| THERUDDOCKS@COMCAST.NET | | | |
| E-mail address: (to be used for future annual report notification) | | | |
| | | | |
| For further information concerning this matter, please call: | | | |
| BARBARA RUDDOCK at (941) | 379 8344 me Telephone Number | | |
| Name of Contact Person Area Code & Dayti | me Telephone Number | | |
| Enclosed is a \$35.00 check made payable to the Department of State. | | | |
| Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Clifton Buildit | ection orporations ng | | |
| Tallahassee, FL 32314 2661 Executive Center Circle | | | |

Tallahassee, FL 32301

TO:

Amendment Section

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: DBR ADMINISTRATION SERVICES, INC 2. The principal office address: 5571 MARQUESAS CIRCLE, SARASOTA, FL34233 3. The mailing address (if different): 3/23/2009 4. Date of incorporation/qualification: Document number: 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) **GARY P HARRIS** 5571 MARQUESAS CIRCLE, SARASOTA, FL34233 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): BARBARA RUDDOCK 7456 ROXYE LANE, SARASOTA, FL34240 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.

BRUDON BARRARA RUDOCK - POSITION THE COLOR OF THE COLOR O

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.

BUDGO - Flood Date

If signing on behalf of an entity:

Typed or Printed Name

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