

P 09000031493

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

WAIT

MAIL

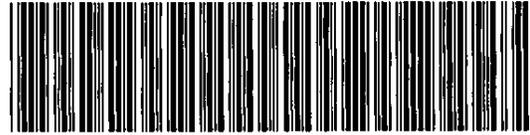
(Business Entity Name)

(Document Number)

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10 MAR 18 AM 9:30

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

FILED

10 MAR 18 AM 9:35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RA. Chavez
C.COULLETTE

MAR 18 2010

EXAMINER

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Monroe Adams Trust Corp.
Name of Corporation

DOCUMENT NUMBER: P09000031493

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:

Daphne E. Gilbert
Name of Contact Person

Tsamoutales Strategies
Firm/Company

Post Office Box 128
Address

Tallahassee, Florida 32302-0128
City/State and Zip Code

daphne@tsamoutales.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Daphne E. Gilbert at (850) 294.4009
Name of Contact Person Area Code & Daytime 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
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

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: Monroe Adams Trust Corp.
- 2. The principal office address: 106 E College Avenue Suite 1200
Tallahassee, Florida 32301
- 3. The mailing address (if different): _____
- 4. Date of incorporation/qualification: 4/7/2009 Document number: P09000031493
- 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)

J. Martin Hayes
106 E College Avenue Suite 1200
Tallahassee, Florida 32301

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

Frank N. Tsamoutales
106 East College Ave Suite 900
P.O. Box NOT acceptable
Tallahassee, Florida 32301

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 TALLAHASSEE, FLORIDA

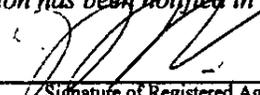
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

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

Frank N. Tsamoutales
 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

3/5/10
 Date

If signing on behalf of an entity:
FRANK W. TSAMOUTALES
 Typed or Printed Name

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