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COVER LETTER

TO: Amendment Section Division of Corporations

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SUBJECT: WORTHY & COMPANY, INC

Name of Corporation

P0900056232

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:

BONNIE BEDELL

Name of Contact Person

WORTHY & COMPANY, INC

Firm/Company

1467 WINDWARD DRIVE

Address

MELBOURNE, FL 32935-5309

City/State and Zip Code

BONNIE@WORTHYANDCOMPANY.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

BONNIE BEDELL

321 (610-79

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
Tallahassec, FL 32301

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

statement of cho	nge is submitted for a corpo	0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this oration organized under the laws of the State of Florida	
	the corporation: Worthy	fice or registered agent, or both, in the State of Florida. & Company, Inc.	
2. The principal	office address: 1467 Wil	ndward Drive, Melbourne, FL 32935-5309	
3. The mailing a	address (if different):		
4. Date of incor	poration/qualification: 6/2	9/09 Document number: P0900056232	
	l street address of the currer rtment of State: (If resigned,	nt registered agent and registered office on file with the , enter resigned)	
	BONNIE SUE BED	DELL	
	1869 SARNO ACCESS		
	MELBOURNE, FL	32935-3985	
6. The name and (if changed):	I street address of the new re	egistered agent (if changed) and /or registered office	
	BONNIE SUE BED	DELL E	
	BONNIE SUE BEDELL 1467 WINDWARD DRIVE P.O. Box NOT acceptable MELBOURNE, FL 32935-5309		
	MELBOURNE, FL	P.O. Box NOT acceptable 32935–5309	
The street address changed will		nd the street address of the business office of its registered agent,	
Such change wa authorized by th	as authorized by resolution ne board, or the corporation	duly adopted by its board of directors or by an officer so has been notified in writing of the change.	
495	Bedell	President	
I hereby accept I further agree performance of agent. Or, if th	to comply with the provisio my duties, and I am familio is document is being filed n	Printed or typed name and title red agent and agree to act in this capacity. ns of all statutes relative to the proper and complete ar with and accept the obligation of my position as registered nerely to reflect a change in the registered office address, I ben notified in writing of this change.	
195X	zedell	Registered Agent	
Sig	nature of Registered Agent	Date	
If signing on be	half of an entity:		
T	yped 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 * * *