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Division of Corporations

Florida Department of State
Division of Corporations
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To:

Division of Corporations

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: (850)617-6380

From:

Account Name : CORPORATION SERVICE COMPANY

Account Number : I20000000195 Phone : (850)521-1000 Fax Number : (850)558-1515

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address:

PECLIVELD 1 JUN 22 AM 9: 59 SECHETARY OF STATE ALLAHASSEE, FLORIDA

## REGISTERED AGENT CHANGE 431 CORPORATION

Certificate of Status	0
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## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

	he provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this change is submitted for a corporation organized under the laws of the State of Deleware	
	rder to change its registered office or registered agent, or both, in the State of Florida.	
i. The name of	of the corporation: 431 Corporation	
2. The principa	pal office address: 2500 Wrangle Hill Road, Bear, DE 19701 US	<u>.</u>
3. The mailing	g address (if different):	
4. Date of inco	orporation/qualification: 09/20/1990 Document number: P31418	
	and street address of the current registered agent and registered office on file with the partment of State:	
	Harlow C Middleton	
	28334 Churchill Smith Lane	<u> </u>
	Mount Dora, FL 32757 US	こと
6. The name an (if changed):	and street address of the new registered agent (if changed) and /or registered office	THE JUN 22 PH 1: 02
	Corporation Service Company	PGR FOR
	1201 Hays Street	
	(P.O. Box NOT acceptable)	72
	Tallahassee, FL 32301	
The street adde	dess of its registered office and the street address of the business office of its registered agent, ill be identical.	,
Such change w authorized by t	was authorized by resolution duly adopted by its board of directors or by an officer so the burne, or the corporation has been notified in writing of the change.	
	TEMPER DAVIS DIVA VP 3 GO	everal Courses
I hereby accept I further agree of my dutes, ar document is be corporation ha	of the appointment as registered agent and agree to act in this capacity.  e to comply with the provisions of all statutes relative to the proper and complete performance and I am familiar with and accept the obligation of my position as registered agent. Or, if this eing filed merely to reflect a change in the registered office address, I hereby confirm that the as been notified in writing of this change.	e \$
By: / - 1 Y	tion Service Company  (c 22-2011  (Date)	
If signing on be Matt	behalf of an entity:  thew Young	
As	(Typed or Printed Name)	
	* * * FIT THE DEF. *22 AA * *	

MAKE CHECKS PAYABLE TO FLORIDA DEPARIMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (8/05)