40373

(Red	questor's Name)	
(Add	dress)	
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(City	//State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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C. Coulliette AUG 2 9 2007

COVER LETTER

Division of Corporations		
SUBJECT: Todd and Associates A		
(Nam	e of Alien Business Organization)	
Dear Sir or Madam:		
The enclosed Statement of Change of Reg fee(s) are submitted for filing.	istered Agent/Registered Office for Alien Business Organization and	
Please return all correspondence concernir	ng this matter to the following:	
Gary D. Todd		
(Name of Person)		
Todd and Associates Architect	ture and Planning, Inc.	
(Firm/Company)		
4019 North 44th Street		
(Address)		
Phoenix, AZ 85018		
(City/State and Zip Code)		
For further information concerning this ma	atter, please call:	
Gary D. Todd	at (602) 952-8280	
(Name of Person)	(Area Code & Daytime Telephone Number)	
STREET/COURIER ADDRESS:	MAILING ADDRESS:	
Registration Section	Registration Section	
Division of Corporations	Division of Corporations	
Clifton Building	P.O. Box 6327	
2661 Executive Center Circle Tallahassee, Florida 32301	Tallahassee, Florida 32314	
Enclosed is a check for the following am	oount:	
✓ \$35.00 Filing Fee	\$43.75 Filing Fee & Certified Copy	

INHS23 (08/05)

TO: Registration Section



RECEIVED 07 AUG 29 PM 2: 20

FLORIDA DEPARTMENT OF STATE OF

August 15, 2007

GARY D. TODD 4019 NORTH 44TH STREET PHOENIX, AZ 85018

SUBJECT: TODD AND ASSOCIATES ARCHITECTURE AND PLANNING, INC.

Ref. Number: P40373

We have received your document for TODD AND **ASSOCIATES** ARCHITECTURE AND PLANNING, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please find the proper form enclosed.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6916.

Carol Mustain **Document Specialist**

Letter Number: 707A00049697

APPROYE

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 Arizona	
in order to change its registered office or registered agent, or both, in the State of Florida.	
. The name of the corporation: TODD AND ASSOCIATES ARCHITECTURE AND PLANNING, INC.	
2. The principal office address: 4019 N. 44TH ST., PHOENIX, AZ 85018	
3. The mailing address (if different):	
1. Date of incorporation/qualification: 9/8/92 Document number: P40373	
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:	
CORPORATION INFORMATION SERVICES, INC.	
1201 HAYS STREET	
TALLAHASSEE, FL 32301	<u></u>
5. The name and street address of the new registered agent (if changed) and /or registered office (if changed):	#00 F
CORPDIRECT AGENTS, INC.	
515 E. PARK AVENUE (P.O. Box NOT acceptable)	7 c 1 h
TALLAHASSEE, FL 32301	- 17
The street address of its registered office and the street address of the business office of its registered agent is changed will be identical.	,
Such change was an to zeed or resolution duly adopted by its board of directors or by an officer so authorized by the first at the first and has been notified in writing of the change.	
GARY D. TODD, PRESIDENT (Printed or typed name and title)	
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 locument 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.	e is e
May	
(Signature of Registered Agent) (Date) f signing on behalf of an entity:	
Ricky Soto, Assistant Secretary : (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)