P93000 88/22

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COVER LETTER

Division of Corporations SUBJECT: TFP Enterprises, Inc. (Name of Corporation) DOCUMENT NUMBER: P93000088122 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: G. Alan Howard, Esq. (Name of Contact Person) Milam Howard Nicandri Dees & Gillam, P.A. (Firm/Company) 14 East Bay Street (Address) Jacksonville, FL 32202 (City/State and Zip Code) For further information concerning this matter, please call: G. Alan Howard (Name of Contact Person) Enclosed is a \$35.00 check made payable to the Department of State. Mailing Address: Street Address: Amendment Section Amendment Section **Division of Corporations** Division of Corporations Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, FL 32314 Tallahassee, FL 32301

TO:

Amendment Section

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, inge is submitted for a corporation organized under the laws of the State of Florida or to change its registered office or registered agent, or both, in the State of Florida.	this	
1. The name of t	the corporation: TFP Enterprises, Inc.		
2. The principal	office address: 5011 Gate Parkway, Suite 150, Jacksonville, FL 32256		
3. The mailing a	address (if different):		
4. Date of incorp	poration/qualification: 12/21/93 Document number: P93000088122		
	d street address of the current registered agent and registered office on file with the rtment of State:		
	Milam Howard Nicandri Dees & Gillam, P.A.		
	208 North Laura Street, Suite 800		
	Jacksonville, FL 32202	06 A1	-11
6. The name and (if changed):	I street address of the new registered agent (if changed) and /or registered office of the new registered agent (if changed) and /or registered office of the new registered agent (if changed) and /or registered office of the new registered agent (if changed) and /or registered office of the new registered agent (if changed) and /or registered office of the new registered agent (if changed) and /or registered office of the new registered agent (if changed) and /or registered office of the new registered agent (if changed) and /or registered office of the new registered agent (if changed) and /or registered office of the new registered agent (if changed) and /or registered office of the new registered agent (if changed) and /or registered office of the new registered agent (if changed) and /or registered office of the new registered agent (if changed) and /or registered office of the new registered agent (if changed) and /or registered agent (if changed) and /or registered agent (if changed) and /or registered agent (if changed) are registered agent (if changed) and /or registered agent (if changed) are registere)G 25 A	
	Milam Howard Nicandri Dees & Gillam, P.A.	AM 12:	
	14 East Bay Street	52	
	(P.O. Box NOT acceptable) Jacksonville, FL 32202		
The street addre	ess of its registered office and the street address of the business office of its registe be identical.	ered a	gent,
Such change wa authorized by th	as authorized by resolution duly adopted by its board of directors or by an officer be board, or the corporation has been notified in writing of the change.	so	
Signatu (Signatu	ure of an Officer or directory (Printed or typed name and title)	NA.	25
I hereby accept I further agree to of my duties, an document is bei corporation fat	the appointment as registered agent and agree to act in this capacity. to comply with the provisions of all statutes relative to the proper and complete pend I am familiar with and accept the obligation of my position as registered agent in the filed merely to reflect a change in the registered office address, I hereby confit been notified in writing of this change.	erforn Or, rm thu	nance if this at the
644	6.15-06		
	Enapline of Registered Agent) (Date) Chalf of an entity:		
GALA	W Houses		
(1	Typed of Printed Name)		

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