

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

P94000010006

SUBJECT: TREE MEDIC TREE SURGEONS, INC.
(Name of corporation)

DOCUMENT NUMBER: P94000010006

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:

H. DAVIS-UPCHURCH, JR., ESQ.
(Name of person)

UPCHURCH & ESPOSITO, P.A.
(Name of firm/company)
Attorneys At Law
1510 N. Ponce de Leon Blvd.

(Address)

St. Augustine, Florida 32084

(City/state and zip code)

For further information concerning this matter, please call:

H. DAVIS UPCHURCH, JR., ESQ. at (904) 825-1990
(Name of 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
409 E. Gaines Street
Tallahassee, FL 32399

500008337695--3
-10/11/02--01070--002
*****35.00 *****35.00

FILED
02 OCT 11 AM 11:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

P94000010006
EACH 10-11-02
2/3

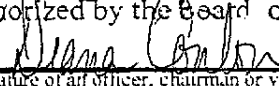
**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED
AGENT OR BOTH FOR CORPORATIONS**

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: TREE MEDIC TREE SURGEONS, INC.
2. The principal office address: 6912 Cypress Lake Court
St. Augustine, Florida 32086
3. The mailing address (if different): Same as above
4. Date of incorporation/qualification: 2/8/94 Document number: P94000010006
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
The Law Firm of Lawrence J. Spiegel, Chartered d/b/a
AmeriLawyerTM
343 Almeria Avenue, Coral Gables, Florida 33134
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
UPCHURCH & ESPOSITO, P.A.
H. DAVIS UPCHURCH, JR., ESQUIRE
1510 N. Ponce de Leon Blvd., St. Augustine, Florida 32084
(P.O. Box or personal mailbox NOT acceptable)

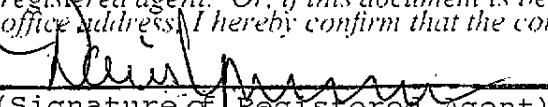
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

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, chairman or vice chairman of the board)

DIANA CONLON (Secretary/Treasurer)
(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)

October 8, 2002
(Date)

If signing on behalf of an entity:

H. DAVIS UPCHURCH, JR., ESQ.
(Typed or Printed Name)

Partner/Upchurch & Esposito, P.A.
(Capacity)

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE AND MAIL TO:
DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

FILED
02 OCT 11 AM 11:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA