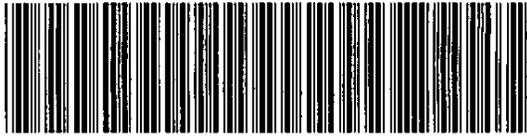


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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

7/14/09  
77

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only

**THOMAS C. TYLER, JR., P.A.**  
**FIDUCIARY CONSULTING GROUP, INC.**

735 E. Avenue, Suite 206  
Venice, Florida 34285  
(941) 488-4422 Fax (941) 483-4992  
[Tom@Bettersonlaw.com](mailto:Tom@Bettersonlaw.com)

Wills, Trusts, Estates  
Business Planning  
Taxation  
Real Property

Masters in Tax Law from  
University of Florida

August 10, 2009

Amendment Section  
Division of Corporations  
PO Box 6327  
Tallahassee, FL 32314

RE: Fiduciary Consulting Group, Inc.

Dear Sir or Madam:

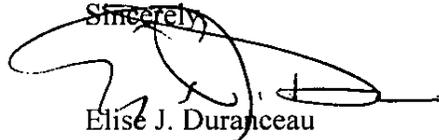
Please find enclosed the executed Statement of Change of Registered Agent Office and check #2662 in the amount of \$35.00 to cover the cost of filing it.

Please update your records to reflect the change of address to the principal office, the mailing address and the officers of the noted above entity, which shall now read as follows:

735 East Venice Avenue, Suite 206  
Venice, FL 34285

Thank you.

Sincerely,



Elise J. Duranceau  
Assistant to Tom Tyler

ejd  
Enclosure

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Fiduciary Consulting Group, Inc.  
Name of Corporation

**DOCUMENT NUMBER:** P95000046580

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:

Tom Tyler  
Name of Contact Person

Thomas C. Tyler, Jr., P.A.  
Firm/Company

735 East Venice Avenue, Suite 200  
Address

Venice, FL 34285  
City/State and Zip Code

elise@bettertonlaw.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Tom Tyler at ( 941 ) 488-4422  
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  
Tallahassee, FL 32301

**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: Fiduciary Consulting Group, Inc.
2. The principal office address: 735 East Venice Avenue, Suite 206  
Venice, FL 34285
3. The mailing address (if different): same as above
4. Date of incorporation/qualification: 6-15-1995 Document number: P95000046580
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

Thomas C. Tyler, Jr.  
981 Ridgewood Avenue, Suite 104  
Venice, FL 34285

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Thomas C. Tyler, Jr., P.A.  
735 East Venice Avenue, Suite 206  
P.O. Box NOT acceptable  
Venice, FL 34285

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TALLAHASSEE, FLORIDA

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]  
Signature of an officer or director

President  
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]  
Signature of Registered Agent

August 10, 2009  
Date

If signing on behalf of an entity:

Thomas C. Tyler, Jr.  
Typed or Printed Name

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