P96000030193 Requestor's Name

DONASIM INC. 119 VARSITY CIR ALTAMONTE SPRINGS FL 32714

CR2E031(1/95)

ALTAMONTE SPRINGS FL 32714 Office Use Only CURPURATION MANUELS, & DOCUMENT MUMBER(S), (if known): 1. (407) 865 - 5789 2. (Corporation Name) (Document #) 3. (Corporation Name) (Document#) 00002276590--3 -08/25/97--01148--004 *****35.00 ******35.00 4. _____(Corporation Name) ☐ Walk in Pick up time Certified Copy Photocopy Mail out ☐ Will wait Certificate of Status AMENDMENTS NEW FILINGS Profit Amendment NonProfit Resignation of R.A., Officer/ Director Limited Liability Change of Registered Agent Domestication Dissolution/Withdrawal Other Merger OTHER FILINGS REGISTRATION/ QUALIFICATION 2 Annual Report Foreign Fictitious Name Limited Partnership * 1056, 2267, 60 767 20 R.A. Charge Name Reservation Reinstatement Trademark Other

Examiner's Initials



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

August 14, 1997

DONASIM, INC. 119 Varisty Circle Altamonte Springs, FL 32714

SUBJECT: DONASIM, INC. Ref. Number: P96000030193

This will acknowledge receipt of your correspondence which is being returned for the following reason(s):

The fee to file your document is \$35.

If you have any questions concerning this matter, please either respond in writing or call (850) 487-6910.

Letter Number: 197A00041338

Louise Flemming-Jackson Corporate Specialist Supervisor

Florida Department of State, Sandra B. Mortham, Secretary of State

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

Pursuant to the provisions of sections 607.0502, 617.0502, 6 undersigned corporation organized under the laws of the Sta	
submits the following statement in order to change its registe.	
State of Florida.	3,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
1. The name of the corporation is: DONASIM, INC.	
2. The mailing address of the corporation is: 119 VARSIT	CIR; ALTAMONTE SPRINGS FL 32714
Date of incorporation/qualification: 4/8/96	Document number:
4. The name and address of the current registered agent and o	ffice:
DONALD R. SIMMS	F _S 9
1706 GROVE PARK DR	FILED SECRETARY OF STATE ALLAHASSEE, FLORID e: (P. O. Box Not Acceptable)
ORANGE PARK FL 32073	HAS: 22
5. The name and address of the new registered agent and office	e: (P. O. Box Not Acceptable)
DONALD R. SIMMS	DF PROPERTY OF THE PROPERTY OF
119 VARSITY CIR	TATI ORN
ALTAMONTE SPRINGS FL 32714	
The street address of its registered office and the street add agent, as changed, will be identical.	ress of the business office of its registered
Such change was authorized by resolution duly adopted by authorized by the board.	
West of the State	
(Signature of an officer, chairman or vice chairman of the bo	$\frac{O8 - O9 - 97}{\text{(Date)}}$
DONALD R. SIMMS, PRESIDENT	
(Printed or typed name and title)	(Date)
Having been named as registered agent and to accept ser corporation, I hereby accept the appointment as registered I further agree to comply with the provisions of all statute performance of my duties, and I im familiar with and accept series agent.	pice of process for the above stated agent and agree to act in this capacity. I relative to the proper and complete ept the obligation of my position as
DONALD R. SIMMS (Signature of Registered Agent)	08-09-97 (Date)
If signing on behalf of an entity:	
N/A (Typed or Printed Name)	N/A (Capacity)
(Typed of Printed Name)	Cupacity) FILING FEE: \$35.00