

SEP. 12. 2012 4:50PM

ons ACKERMAN LINK SARTORY

NO. 5503 PP. 1/2 of 1

P9600032610

Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850) 617-6380

From: Account Name : ACKERMAN, LINK & SARTORY, P.A.
Account Number : 110435002274
Phone : (561) 838-4100
Fax Number : (561) 838-5305

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**REGISTERED AGENT CHANGE
ACKERMAN, LINK & SARTORY, P.A.**

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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: Ackerman, Link & Sartory, P.A.
2. The principal office address: 777 South Flagler Drive, Suite 800 East
West Palm Beach, FL 33401
3. The mailing address (if different): 777 South Flagler Drive, Suite 800 East
West Palm Beach, FL 33401
4. Date of incorporation/qualification: 4/12/1996 Document number: P96000032610
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)

Wendy Sartory Link222 Lakeview Avenue, Suite 1250West Palm Beach, FL 33401

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

Wendy Sartory Link777 South Flagler Drive, Suite 800 EastP.O. Box NOT acceptableWest Palm Beach, FL 33401

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.

Wendy Sartory Link
Signature of an officer or directorWendy Sartory Link, 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.

Wendy Sartory Link
Signature of Registered Agent9/12/2012

Date

If signing on behalf of an entity:

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

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