## THE P96000057589 CICCLETT Medical & Leta Magnature Commercial, Circlett and Construction Linguistics

1435 EAST PIEDMONT DRIVE . SUITE 210 . TALLAHASSEE, FLORIDA : 2312

Tammy de Soto Cicchetti
ATTORNEY AT LAW

\*\*\*\*\*35.00 \*\*\*\*\*35.00

May 1, 1998

By Hand Delivery

Secretary of State Division of Corporations Amendment Section Post Office Box 6327 Tallahassee, FL 32314

RE:

Panhandle Cash Cow. Inc.

Our File No. :

7261

RE:

Southern Cash Cow, Inc.

Our File No. :...

7268

And

RE:

Positive Investments, Inc.

Our File No. :

7271

Dear Sir or Madam:

Please find enclosed three Statement of Change of Registered Office of Registered Agent or Both for Corporations regarding the above referenced cases. Also registered are three checks in the amount of \$35.00 each for the filing fee of each form. Please registered Registered Agent as indicated on them as soon as possible.

If you should have any questions, please do not hesitate to contact me. Thank you.

Sincerely,

Tammy de Soto Cicchetti

TdC/srd Enclosures MAIL OUT

Telephone: (850) 422-2774 • Facsimile: (850) 422-1416



Sports and Entertainment Law

Medical & Legal Malpractice

Commercial, Corporate and Construction Litigation

435 EAST PIEDMONT DRIVE . SUITE 210 . TALLAHASSEE. FLORIDA 32312

Tammy de Soto Cicchetti
ATTORNEY AT LAW

May 11, 1998

By Hand Delivery

Secretary of State ATTN: JOY Division of Corporations Amendment Section Post Office Box 6327 Tallahassee, FL 32314

RE: Panhandle Cash Cow, Inc.

Our File No. : 7261

RE: Southern Cash Cow, Inc.

Our File No. : 7268

And

RE: Positive Investments, Inc.

Our File No. : 7271

Dear Sir or Madam: You!

At you request, please find enclosed the three original Statement of Change of Registered Office or Registered Agent or Both for Corporations regarding the above referenced cases. As you recall, you previously received the checks, on May 1, 1998. Please change the Registered Agent as indicated on them as soon as possible. Also, please back date to the original date of receipt on May 1, 1998.

If you should have any questions, please do not hesitate to contact me. Thank you.

Sincerely,

Tammy de Soto Cicchetti

TdC/srd Enclosures

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

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

## 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, the undersigned corporation organized under the laws of the State ofFlorida
submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation is: Panhandle Cash Cow, Inc.
2. The mailing address of the corporation is: 8873 Blackheath Way
Tallahassee, Florida 32312
3. Date of incorporation/qualification: 7/9/96 Document number: P96000057589 (9)
4. The name and address of the current registered agent and office:
Tammy de Soto Cicchetti, Esq.  1435 East Piedmont Drive, Suite 210
1435 East Piedmont Drive, Suite 210
Tallahassee, Florida 32312
5. The name and address of the new registered agent and office: (P. O. Box Not Acceptable)
Mr. Wade Williams
121 West Clark Street
Quincy, Florida 32351
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.
(Signature of an officer, chairman or vice chairman of the board)  (Date)
(Signature of an officer, chairman of vice chairman of the board)
M. David Arrington, President 5/8/78
(Printed or typed name and title)  Having been named as registered agent and to accept service of process for the above stated corporation, 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.  (Signature of Registered Agent)  (Date)
If signing on behalf of an entity:
(Typed or Printed Name) (Capacity)

CR2E045(3/96)