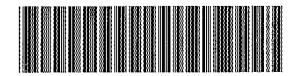
## P 96000068600

(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:			
(Address)  (City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status	(Re	questor's Name)	•
(Address)  (City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status			
(Address)  (City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status	, (Ad	drace)	
(City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status	(Adi	aressy	
(City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status			
(City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status	(Add	dress)	
PICK-UP   WAIT   MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status	,		
PICK-UP   WAIT   MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status			
(Business Entity Name)  (Document Number)  Certified Copies Certificates of Status	(Cit	y/State/Zip/Phone #	<i>f</i> )
(Business Entity Name)  (Document Number)  Certified Copies Certificates of Status			
(Business Entity Name)  (Document Number)  Certified Copies Certificates of Status	PICK-UP	TIAW [	MAIL
(Document Number)  Certified Copies Certificates of Status	_	<del>_</del>	<del></del>
(Document Number)  Certified Copies Certificates of Status			
Certified Copies Certificates of Status	(Bu	siness Entity Name	*}
Certified Copies Certificates of Status			
Certified Copies Certificates of Status			
	(Do	cument Number)	
	Certified Copies	Certificates o	f Status
Special Instructions to Filing Officer:		<b>-</b>	
Special Instructions to Filing Officer:			
	Special Instructions to I	Filina Officer:	
			}
			-
			[
			{

Office Use Only



500021851275

08/26/03--01003--011 \*\*245.00

RECEIVED

03 AUG 25 PM 3: 45

PARECEIVED

STATE



## CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Wanda Pistella PA	
	Art of Inc. File
	LTD Partnership File  Foreign Corp. File  L.C. File
	Fictitious Name File  Trade/Service Mark  Merger File
	Art. of Amend. File
-	Annual Report / Reinstatement  Cert. Copy  Photo Copy
•	Certificate of Good Standing Certificate of Status
	Certificate of Fictitious Name  Corp Record Search  Officer Search
Signature	Fictitious Search  Fictitious Owner Search  Vehicle Search
Requested by 8/25	Driving Record  UCC 1 or 3 File  UCC 11 Search
Name Date Time  Walk-In Will Pick Up	UCC 11 Seatch  UCC 11 Retrieval  Courier

可以是一个点面的,就是一个人的,我们就是一个人的,我们就是一个人的,我们就是一个人的,我们就是一个人的,我们就是一个人的,我们就是一个人的,我们就是一个人的,他

## 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 of $\frac{1000000}{10000000000000000000000000000$		
the State of Florida.		
1. The name of the corporation: Wanda Pistella, P.A.		
2. The mailing address of the corporation: 7385 SW 87 AVENUE,		
Mianu, Florida 33173		
3. Date of incorporation/qualification: 8/16/1996 Document number: P96000 686		
4. The name and address of the current registered agent and office:		
Wanda Pistella P.A.		
3001 Porce de Heon Blue *262 = = =		
Coral Cables, Fi 33 134 5 5		
5. The name and address of the new registered agent (if changed) and/or registered office (if changed)		
P.O. Box Not Acceptable)		
Nanda MStella, t.H.		
7385 SUO 87 Avenue		
Mianu, Fi 33173.		
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.		
1/2/03 X/2/03		
(Signature of an officer, chairman or vice chairman of the board) (Date)		
Wanda Pistella, President		
(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		
regulared agent.		
WWW (Signature of Registered Agent) (Date) 703		
If signing on behalf of an entity:		
Wanda Listella PA, President (Capacity)		
* * * FILING FEE: \$35.00 * * *		
CR2E045(9/00)		

P.O. Box 6327

TALLAHASSIE, FL 32314

Division of Corporations