## P96000087123

ULMER, MURCHISON, ASHBY & TAYLOR

ATTORNEYS AT LAW

200 WEST FORSYTH STREET, BUILTE 1800

POST OFFICE BOX 478

JACKBONVILLE, FLORIDA 32201

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CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1	Corporation Name) (Document #) 70402035857011
2.	******35.00 ******35.08
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NEW FILINGS	AMENDMENTS
Profit	Amendment
NonProfit	Resignation of R.A., Officer/ Director
Limited Liability	Change of Registered Agent
Domestication	Dissolution/Withdrawal
Other	Merger
jmaratinoonijeavereta	THE REAL PROPERTY OF THE PROPE
OTHER FILING	・ 『4】 - 『元年記 近年記 医子科学科の中央 大阪の大学の大学的 女子 ステルス 大学 はまかせ 新生物 日
Annual Report	QUALIFICATION

Foreign
Limited Partnership
Reinstatement
Trademark
Other

RA Chg.

V8 JAN -7 1997

Examiner's Initials

Fictitious Name

Name Reservation

FI	orida Department of State			
STATEMENT OF	CHANGE OF REGISTEI OR BOTH FOR C			
the undersigned cou	ons of sections 607.0502, 61 rporation organized under ng statement in order to ch Florida.	the laws of the Sta	or 617.1508, Florida Statutes, ate of offic a or registered agent, or	•
1a. The name of the	corporation is: AND EVER	YTHING NICE TRADIN	G COMPANY, INC.	
1b. The mailing addre	ess of the corporation is:	Suite 1500, 1301 Jacksonville, FL	200	
	ation: October 21, 1996  ddress of the current registe		C 2 C 2	
Carl Suit	M. Stewart e 1600 W. Forsyth Street			<u>ئ</u>
	sonville, FL 32202	agent and office:(P.C	 ). Box Not Acceptable)	
<u>Carl</u> Suit	M. Stewart e 1500 Riverplace Blvd.			
<del></del>	sonville, FL 32207			
registered agent, as o	changed, will be identical.		of the business office of its	
Such change was au so authorized by the  (Signature of an of vice chairman  (Printed or typed	thourd.  The board of the board	odopted by its board	of directors or by an officer	
corporation, I hereby	y acceptine appointmentas of the provisions of duties, and I am familiar w	registered agentand f all statutes relative	process for the above stated dagree to actin this capacity. e to the proper and complete obligation of my position as (Date)	

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$35.00