## Timothy J. Murty

Attorney At Law

1633 Periwinkle Way • Suite A • Sanibel Island • Florida 33957-4404

941-472-1000 • Facsimile 941-472-4449

P97000035129

Department of State Division of Corporations P. O. Box 6327 Tallahassee, Florida 32314 500002161815--7 -05/01/97--01060--006 \*\*\*\*\*35.00 \*\*\*\*\*35.00

IN RE:

SANIBEL HOLDING COMPANY, INC.

## TO WHOM IT MAY CONCERN:

Enclosed are the original and one copy of the Statement of Change of Registered Agent and Office for the above named Florida corporation and a check in the amount of \$35.00 representing payment of the applicable fees.

07000000 MOONING

Please file same and return a conformed copy to me in the enclosed envelope.

Thank you for your assistance in this matter.

Very truly yours,

TIMOTHY J. MURTY

Attorney at Law

/km

**Enclosures** 

## STATEMENT OF CHANGE OF REGISTERED AGENT AND REGISTERED OFFICE

To the Secretary of State of the State of Florida:

Pursuant to the provisions of Sections 607.034 and 607.037, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement for the purpose of changing its registered agent and registered office in the State of Florida:

FIRST: The name of the Corporation is SANIBEL HOLDING COMPANY, INC.

SECOND: The address of the present Registered Agent is: 1201 Hays Street, Tallahassee, Florida 32301.

THIRD: The address to which its Registered Agent is to be changed is: 1633 Periwinkle Way, Suite A, Florida 33957.

FOURTH: The name of its present Registered Agent is: CORPORATION SERVICE COMPANY

FIFTH: The name of its successor Registered Agent is: TIMOTHY J. MURTY

SIXTH: Such change was authorized by resolution duly adopted by its board of directors or by an officer of the corporation so authorized by the board of directors.

Signature: The OTHY J. MURTY. President

Date: 4/29/97

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, 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 UNDER SECTION 607.0505, FLORIDA STATUTES.

Print/Type Name: TIMOTHY J. MURTY

Signature:

Date: 4/29/4