Soften Soft Constitution of the state of the Requestor's-Nom THER L. DOUDNA Office Use Only COI NUMBER(S), (if known): (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) Pick up time Walk in Certified Copy Mail out ₩ill wait → Photocopy Certificate of Status **NEW FILINGS** AMENDMENTS 400002858654--04/30/99--01096--014 Profit Amendment *****35.00 *****35.00 NonProfit Resignation of R.A., Officer/Director Limited Liability Change of Registered Agent Domestication Dissolution/Withdrawal Other Merger OTHER FILINGS REGISTRATION/ QUALIFICATION : Annual Report Foreign Fictitious Name Limited Partnership Name Reservation Reinstatement Trademark Other

Examiner's Initials

CR2E031(1/95)

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of section 607.0502 or 607.1508, Florida Statutes, the undersigned corporation organized under the laws of the State of Florida, submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

THE DAME OF THE COMBONATION IS. PAINTED IN 100 NOW DAVINGS, I	1	The name of the corr	oration is:	Ameri-Plus Re	al Savings,	Inc
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1a. Date of incorporation:

10/13/97

Document Number:

P97000088948

2. The name and address of the current registered agent and office:

HEATHER L. DOUDNA

2536 Countryside Blvd., Sixth Floor

Clearwater, Florida 33763

3. The name and address of the new registered agent and office:

R. Maury Thornton

2536 Countryside Blvd., Sixth Floor

Clearwater, Florida 33763

The street address of its registered agent 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.

2 Marry THORNSON Treasured

By:

Title:

Date

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.

Name:

Date