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| PICK-UP WAIT MAIL | | | | |
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| Certified Copies Certificates of Status | | | | |
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| Special Instructions to Filing Officer: | | | | |
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SECRETARY OF STATE
TALLAHASSEE, FLORID

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COVER LETTER

| | TO: Amendment Section Division of Corporations | | | | |
|--------------------------|---|--|---|--|--|
| | SUBJECT: | C.W.R.,INC. | | | |
| | | Name of Corporation | on | | |
| | DOCUMENT NUMBER: | P9800002 | 2588 | | |
| | The enclosed Statement of Change of Reg | | | | |
| | Please return all correspondence concerning this matter to the following: | | | | |
| | (| CHARLES W. RIC | SH III | | |
| Name of Contact Pers | | son | | | |
| · | | | | | |
| C.W.R.,INC. Firm/Company | | | | | |
| | | , , | , | | |
| | 4495 R | OOSEVELT BLV | D. STE 304 | | |
| | | Address | | | |
| | IACK | CONVILLE EL 22º | 210 2201 | | |
| | JACK | SONVILLE, FL 322 City/State and Zip C | ode | | |
| | | | | | |
| | E-mail address: (to b | e used for future an | nual report notification) | | |
| | For further information concerning this ma | atter, please call: | | | |
| | CHARLES W. RICH III | l at (| 315) 569-3388 | | |
| | Name of Contact Person | A | 315) 569-3388 rea Code & Daytime Telephone Number | | |
| | Enclosed is a \$35.00 check made payable | a \$35.00 check made payable to the Department of State. | | | |
| | Mailing Address: | : . | Street Address: | | |
| | Amendment Sec Division of Cor | | Amendment Section Division of Corporations | | |
| | P.O. Box 6327 | porations | Clifton Building | | |
| | Tallahassee, FL | 32314 | 2661 Executive Center Circle | | |
| | | | Tallahassee, FL 32301 | | |

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

| statement of cha | provisions of sections 607.0302, 617.0302, 607.1308, or 617.1308, Florida nge is submitted for a corporation organized under the laws of the State of r to change its registered office or registered agent, or both, in the State of | FLORIDA |
|------------------------------------|---|---------------------------------|
| 1. The name of t | he corporation: C.W.R., INC. | |
| 2. The principal | office address: 4495 ROOSEVELT BLVD. STE 304 | |
| JACKSON | VILLE, FL 32210-3381 | |
| 3. The mailing a | ddress (if different): | |
| 4. Date of incorp | poration/qualification: 03/09/1998 Document number: | P98000022588 |
| | street address of the current registered agent and registered office on file w tment of State: (If resigned, enter resigned) | ith the |
| | DOUGLAS PERSSE (C.W.R.,INC.) | |
| | 407 HWY AIA #444 | TAL SE |
| | SATELLITE BEACH, FL 32937 | 700 NOV -6 SECRETARY TALLAHASSE |
| 6. The name and (if changed): | street address of the new registered agent (if changed) and /or registered or | mere |
| | CHARLES W. RICH III (C.W.R.,INC.) | A II: 5 |
| | 4495 ROOSEVELT BLVD. STE 304 | _ 10 A _ 00 A |
| | P.O. Box NOT acceptable | |
| | JACKSONVILLE, FL 32210-3381 | |
| The street address changed will | ess of its registered office and the street address of the business office of be identical. | its registered agent, |
| Such change wa authorized by th | as authorized by resolution duly adopted by its board of directors or by a ne board, or the corporation has been notified in writing of the change. | n officer so |
| Signahi | CHARLES W. RICH re of an officer or director Printed or typed name and | III (PVTS) |
| I haraby accept | the appointment as registered agent and agree to act in this capacity, to comply with the provisions of all statutes relative to the proper and cod I am familiar with and accept the obligation of my position as register ng filed merely to reflect a change in the registered office address, I here been notified in writing of this change. | |
| Charl | 's White 11-20 | <u>5</u> |
| Sig | nature of Registered Agent Date | |
| If signing on be | half of an entity: | |
| | ES W. RICH III (PVTS) yped or Printed Name | |

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