P98000051582

(Re	equestor's Name)			
(Ad	ldress)			
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(Business Entity Name)				
(Document Number)				
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TALLAHASSEE; FLORIDA

RARD CH8

COVER LETTER

TO: Amendment : Division of C	Section Corporations			
SUBJECT:	CDL GROU	JP, INC.	·	
	Name of C	Corporation		
DOCUMENT NUM	BER:P98	000051582		
The enclosed Stateme	ent of Change of Registered Offic	ce/Agent and fee are submitted	d for filing.	
Please return all corre	espondence concerning this matte	er to the following:		
		•	•	
	JON MARSHA	LL ODEN, ESQ.		
	Name of Co	ontact Person		
	EIGHED	DIIGUMED		
_		RUSHMER ompany		
	20 N. ORANGE	AVE., SUITE 1500		
_	Ado	dress	 _	
	ORLANDO	D, FL 32801 and Zip Code		
	City/State a	nd Zip Code		
	JODEN@FISHEF	RLAWFIRM.COM		
E-mail address: (to be used for future annual report notification)				
		,		
For further information	on concerning this matter, please	call:		
JON MAF	RSHALL ODEN, ESQ.	at (407)	843-2111	
	of Contact Person	at (407) Area Code & Daytime	Telephone Number	
Enclosed is a \$35.00	check made payable to the Depar	rtment of State.		
	Mailing Address: Amendment Section	Street Address:	ion	
	Amendment Section Division of Corporations	Amendment Sect Division of Corp		
	P.O. Box 6327	Clifton Building	~	
	Tallahassee, FL 32314	2661 Executive (Center Circle	

Tallahassee, FL 32301

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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, this	
statement of change is submitted for a corporation organized under the laws of the State of FLORIDA in order to change its registered office or registered agent, or both, in the State of Florida.	
The name of the corporation: <u>CDL GROUP, INC.</u> The principal office address: 3001 OLD WINTER GARDEN ROAD, ORLANDO, FL 32805	
2. The principal office address: 3001 OLD WHATER GARDEN ROAD, ORLANDO, 1 E 32003	_
3. The mailing address (if different): SAME AS PRINCIPAL OFFICE ADDRESS	_
4. Date of incorporation/qualification: 06/08/1998 Document number: P98000051582	
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)	
LARRY DICKERSON	
473 KILMER WAY	0
THE VILLAGES, FL 33162	50,75
THE VILLAGES, FL 33162 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): JON MARSHALL ODEN, ESQ. c/o FISHER, RUSHMER 20 N. ORANGE AVE., SUITE 1500 P.O. Box NOT acceptable	.,,
JON MARSHALL ODEN, ESQ. c/o FISHER, RUSHMER	1
20 N. ORANGE AVE., SUITE 1500	
ORLANDO, FL 32801	
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, or the corporation has been notified in writing of the change.	
Signature of an officer or director LARRI D. DICKERSON, PRESIDENT Printed or typed name and title	
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. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.	
Signature of Registered Agent Date	
If signing on behalf of an entity:	
Jon Marshall Oden Typed or Printed Name	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (8/05)

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