P98000059628

TO: Amendment Section Division of Corporations

SUBJECT:	annio i zo	777
(Name of corporation)	90021 73 -10/03/020	1030002
DOCUMENT NUMBER:	*****35.00	*****35.00
The enclosed Statement of Change of Registered Office/Agent and fee are subm	itted for filing.	-
Please return all correspondence concerning this matter to the following:		
(Name of person)		
(Name of person)		
(Name of firm/company) (Name of firm/company)	_	· **
(Name of him/company)		
732 N. Thandon Avenue (Address)	SECR TALLA	02 0
City/state and zip code)	HASSEE,	
For further information concerning this matter, please call:	FLO.	5 D
(Area code & daytime telephone	number)	24

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

CR2E045(07/02)

R.A. Change

T BROWN OCT - 4 2002

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

~ -	607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes,
	or a corporation organized under the laws of the State of
• •	nge its registered office or registered agent, or both, in the State
of Florida.	042 CC 51.64 PA
1. The name of the corporation: $\angle \omega$	Offices of Gang J. Lublin, P.A.
2. The principal office address: 73 a	2 N. Thurston Brenz, O-lando Fl 32803
3. The mailing address (if different):	
4. Date of incorporation/qualification:	7/1/98 Document number: P98000059638
The name and street address of the c Florida Department of State:	surrent registered agent and registered office on file with the
Lubba, Ga	IN T
112 N. S.	mmer/in De.
	F/ 3380/
changed).	e new registered agent (if changed) and /or registered office (if
732 h	V. Thornton Due Box or personal mailbox NOT acceptable)
O-lende	v K1 37803
	ice and the street address of the business office of its registered
Such change was authorized by resolu authorized by the board, or the corpor	ation duly adopted by its board of directors or by an officer so ration has been notified in writing of the change.
(Signature of an officer, chairman or vice chairman of the	te board) Cerry J. Lublin, President. (Printed or typed name and title)
I hereby accept the appointment as re I further agree to comply with the pro performance of my duties, and I am fa registered agent. Or, if this documen office address, I hereby confirm that t	gistered agent and agree to act in this capacity. visions of all statutes relative to the proper and complete amiliar with and accept the obligation of my position as t is being filed merely to reflect a change in the registered the corporation has been notified in writing of this change.
Ja Lufti (Signature of Registered Agent)	9/30/07 (Date)
If signing on behalf of an entity:	(240)
For J. Lublia	Pres.den
(Typed or Printed Name)	(Capacity)

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE AND MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314