P98000074500

(Requestor's Name)	
•	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
•	
Certified Copies Certificates of Status	
f	-
Special Instructions to Filing Officer:	

Office Use Only



800242279878

12/17/12--01048--004 **35.00

FILED

12 DEC 17 MADE UL

SECRETARY DE SIMTE

ALLAHASSEE, FLANDE



COVER LETTER

TO: Amendme Division of	ent Section of Corporations		
SUBJECT:		roup, Inc.	
	Nam	ne of Corporation	**************************************
DOCUMENT NU	JMBER:P98	000074500	The state of the s
The enclosed State	ement of Change of Registered	d Office/Agent and fee a	re submitted for filing.
Please return all co	orrespondence concerning this	matter to the following	:
		h Carter	
•	Name	of Contact Person	
	Carter	Group, Inc.	
	F	irm/Company	· · · · · · · · · · · · · · · · · · ·
	5036 Dr Phillips	s Blvd, Suite	190
-	**************************************	Address	
	Orlando, FL 32	2819	
		state and Zip Code	
(cartergroup@rd	gers.com	
-	E-mail address: (to be used	•	ort notification)
		•	
For further inform	ation concerning this matter, p	olease call:	
Butch Ca	-		203-2442
Na	me of Contact Person	Area Code	203-2442 & Daytime Telephone Number
Enclosed is a \$35.	00 check made payable to the	Department of State.	
	Mailing Address: Amendment Section	Street 2	Address:
	Amendment Section Division of Corporation		lment Section on of Corporations
	P.O. Box 6327		Building
	Tallahassee, FL 32314		xecutive Center Circle
	- · · · - • - ·		ssee, FL 32301

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

	e provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this	
-	hange is submitted for a corporation organized under the laws of the State of Florida	
in ord	der to change its registered office or registered agent, or both, in the State of Florida.	
1. The name of	f the corporation: Carter Group, Inc.	
2. The principa	al office address: 5036 Dr Phillips Blvd, Suite 190, Orlando, FL 32819	
	,	
3. The mailing	address (if different):	
4. Date of inco	prporation/qualification: 24th August, 1998 Document number: P98000074500	
	nd street address of the current registered agent and registered office on file with the artment of State: (If resigned, enter resigned)	
	Butch Carter	
	5108 Fairway Oaks Drive	П
	Windermere, FL, 34786	
6. The name an (if changed):	nd street address of the new registered agent (if changed) and /or registered office :	T
	Butch Carter	
	4828 NEW BROAD Street, Apt. 240	
	ORLANDO, FL, 32814	
The street addr as changed wil	ress of its registered office and the street address of the business office of its registered agent, ll be identical.	
Such change wathorized by t	vas authorized by resolution duly adopted by its board of directors or by an officer so the dorporation has been notified in writing of the change.	
BU	Butch Carter, President & CEO	
•	ture of an officer or director Printed or typed name and title	
I hereby accept I further agree performance of agent. Or, if the hereby synfirm	of the appointment as registered agent and agree to act in this capacity. It is comply with the provisions of all statutes relative to the proper and complete If my duties, and I am familiar with and accept the obligation of my position as registered his document is being filed merely to reflect a change in the registered office address, I that the corporation has been notified in writing of this change.	
But	10.18.12	
Sig	gnature of Registered Agent Date	
If signing on be	ehalf of an entity:	
Butch Cart	er	
1	Typed or Printed Name	

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

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