

P98000094383

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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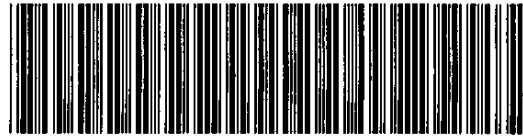
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

RX

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Sherman & Associates, Incorporated
(Name of Corporation)

DOCUMENT NUMBER: P98000094383

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Marcia McEvers
(Name of Contact Person)

Sherman & Associates, Inc.
(Firm/Company)

6719 Winkler Road, #116
(Address)

Ft. Myers, FL 33919
(City/State and Zip Code)

For further information concerning this matter, please call:

Marcia McEvers at (239) 437-9600
(Name of Contact Person) (Area Code & Daytime Telephone Number)

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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

**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.

1. The name of the corporation: Sherman & Associates, Inc.
2. The principal office address: 6719 Winkler Road, # 116, Ft. Myers, FL 33919
3. The mailing address (if different): P.O. Box 1300, Ft. Myers, FL 33902-1300
4. Date of incorporation/qualification: 11/05/1998 Document number: P98000094383
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

Gary L. Sherman

6719 Winkler Road, # 116

Ft. Myers, FL 33919

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Marcia McEvers

6719 Winkler Road, # 116

(P.O. Box NOT acceptable)

Ft. Myers, FL 33919

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.

Karen O. Sherman
(Signature of an officer or director)

Karen Sherman, President/Director
(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.

Marcia A. McEvers
(Signature of Registered Agent)

7-21-06
(Date)

If signing on behalf of an entity:

(Typed or Printed Name)

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

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

IN THE CIRCUIT COURT OF THE TWENTIETH JUDICIAL CIRCUIT IN AND FOR
LEE COUNTY, FLORIDA PROBATE DIVISION

IN RE: ESTATE OF:

GARY L. SHERMAN,

Deceased.

FILE NO.:

DIVISION:

06-CP-002460

Probate: McIver, William C

FILED

JUL 20 2006

LETTERS OF ADMINISTRATION
(single personal representative)

TO ALL WHOM IT MAY CONCERN

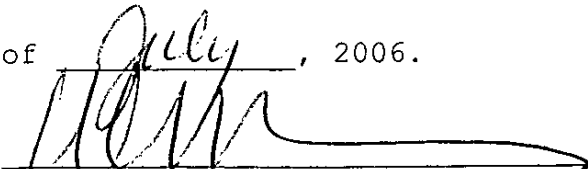
CHARLIE GREEN, CLERK
CIRCUIT/COUNTY COURTS
BY _____ D.C.

WHEREAS, GARY L. SHERMAN, a resident of 15641 Sonoma Drive #206, Fort Myers, Florida 33908 died on June 4, 2006 owning assets in the State of Florida, and

WHEREAS, KAREN O. SHERMAN has been appointed personal representative of the estate of the decedent and has performed all acts as prerequisite to issuance of Letters of Administration in the estate.

NOW, THEREFORE, I, the undersigned circuit judge, declare KAREN O. SHERMAN duly qualified under the laws of the State of Florida to act as personal representative of the estate of GARY L. SHERMAN, deceased, with full power to administer the estate according to law; to ask, demand, sue for, recover and receive the property of the decedent; to pay the debts of the decedent as far as the assets of the estate will permit and the law directs; and to make distribution of the estate according to law.

ORDERED on 19 day of July, 2006.


CIRCUIT JUDGE


cc: William E. McGrew, Esq.

STATE OF FLORIDA - COUNTY OF LEE
I hereby certify that the foregoing is a
true copy as filed in my office and the
same is in full force and effect.

This 20 day of July, 2006

CHARLIE GREEN

Clerk of Circuit Court


Deputy Clerk