## P980001051:70

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## **COVER LETTER**

TO:	Amendment Section Division of Corporations						
SUBJ	ECT:Name of Corporation						
	JMENT NUMBER:						
	closed Statement of Change of Registered Office/Agent and fee are submitted for filing.						
Please	return all correspondence concerning this matter to the following:						
	Mary Lynn Williams  Name of Contact Person						
	Name of Contact Person						
	Greg A Betterton, PA						
	Firm/Company						
	705 5 1/4 1/4 00 1/4 000						
	735 E Venice Ave, Suite 200 Address						
	1.733.003						
	Varios El 24005						
Venice, FL 34285 City/State and Zip Code							
	marylynn@bettertonlaw.com						
	E-mail address: (to be used for future annual report notification)						
For fu	ther information concerning this matter, please call:						
	Mary Lynn Williams at ( 941 ) 488-4422						
	Mary Lynn Williams     at (941)     488-4422       Name of Contact Person     Area Code & Daytime Telephone Number						
Enclos	ed 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						

TO:

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

statement of cha	nge is submitted for a co	orporation organize	507.1508, or 617.1508, Flo d under the laws of the Sta	te of Florida		
			d agent, or both, in the Sta	te of Florida.		
	the corporation: Puttin					
2. The principal	office address: 205 No	okomis Ave S, v	enice, FL 34285			
3. The mailing a	ddress (if different):					
4. Date of incorp	ooration/qualification:	12/17/1998	Document number:	P98000105170		
	I street address of the curtment of State: (If resign	-	at and registered office on t	file with the		
	Greg A. Betterton					
981 Ridgewood Avenue, Suite 101						
	Venice, FL 34285			<del></del>		
6. The name and (if changed):	l street address of the nev	w registered agent (	if changed) and /or register	red office SECRETARY		
	Greg A. Betterton			一題早日		
	735 E Venice Ave,	Suite 200 P.O. Box NOT ac		00° 17 17 1		
	Venice, FL 34285	F.O. BOX NOT ac	ceptable	REFERENCE -		
The street address changed will	ess of its registered office be identical.	ce and the street add	dress of the business offic			
Such change wa authorized by th	as authorized by resolut ne board, or the corpora	ion duly adopted b	y its board of directors or led in writing of the chang	by an officer so		
9k	Olive Park	wed.		RRKINS		
I hereby accept I further agree to of my duties, an document is bei corporation has	the appointment as reg to comply with the prov d I am familiar with an ing filed merely to reflec s been notified in writin	istered agent and a isions of all statute d accept the obliga tt a change in the r g of this change.	ngree to act in this capaci s relative to the proper an tion of my position as reg egistered office address, i	ty. nd complete performance zistered agent. Or, if this I hereby confirm that the		
Sig	nature of Registered Agent		8-31-09 Date			
If signing on be	half of an entity:		_			
	vped or Printed Name		-			

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