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(Requestor's Name) (Address)	500059391405
(Address) (City/State/Zip/Phone #)	09/13/0501032005 **87.50
(Business Entity Name) (Document Number) Certified Copies Certificates of Status	FILED 5 SEP 13 PH 12: 17 SECRETARY OF STATE TALLAHASSEE, FLORIDA
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CAPITAL CONNECTION, INC.	
417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222	
(850) 224-8870 • 1-800-542-8062 • Fax (850) 222-1222	
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	Art of Inc. File
	LTD Partnership File
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	Trade/Service Mark
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	Art. of Amend. File
	RA Resignation_ Change
	Dissolution / Withdrawal
	Annual Report / Reinstatement
	Cert. Copy
	Photo Copy
	Certificate of Good Standing
	Certificate of Status
	Certificate of Fictitious Name
	Corp Record Search
	Officer Search
	Fictitious Search
<u>Rimotom</u>	Fictitious Owner Search
Signature	Vehicle Search
	Driving Record
Requested by:	UCC 1 or 3 File
	UCC 11 Search
Name Date Time	UCC 11 Retrieval
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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.

- 1. The name of the corporation: SHEPPARD & SHEPPARD, P.A.
- 2. The principal office address: <u>1301 PLANTATION ISLAND DRIVE SOUTH, SUITE 204</u> ST. AUGUSTINE, FLORIDA 32080

3. The mailing address (if different):_

- 4. Date of incorporation/qualification: 02/01/1999 Document number: P99000011177
- 5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

SEAN P. SHEPPARD		
99 Oran	ae Stre	et

St. Augustine, Florida 32084

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

SEAN P. SHEPPARD

1301 PLANTATION ISLAND DRIVE SOUTH, SUITE 204 (P.O. Box NOT acceptable)

ST. AUGUSTINE, FLORIDA 32080

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.

ed 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.

Vignature of an officer or director)

If signing on behalf of an entity:

9/12/05

(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)