D'MARAS GROUP, INC. 3411 Ashling Drive Lakeland, FL 33803

Phone #

500003044865--3 -11/16/99--01011--022 *****35.00 *****35.00

Office Use Only

Examiner's Initials

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

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NEW FILINGS		AMENDMENTS	·
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Profit		Amendment	
☐ Not for Profit		Resignation of R.A., Officer/Director	
☐ Limited Liability ☐ Domestication		Change of Registered Agent	
Other		☐ Dissolution/Withdrawal ☐ Merger	
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OTHER FILINGS		REGISTRATION/QUALIFICATION	
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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, 600 the undersigned corporation organized under the laws of the State submits the following statement in order to change its registered the State of Florida.	te of
the State of Florida. 1. The name of the corporation is: D'MARAS GROUP, INC.	
2. The mailing address of the corporation is: 3411 Ashling	Drive, Lakeland, FL 33803
3. Date of incorporation/qualification: 8/16/99	Document number: P99000074411
4. The name and address of the current registered agent and offic	e:
David W. Marshall	
404 Emerald Cove Loop	
Lakeland, FL 33813	70, 90
5. The name and address of the new registered agent and office: (David W. Marshall	P. O. Box Not Acceptable
3411 Ashling Drive	SSE
Lakeland, FL 33803	75
The street address of its registered office and the street address agent, as changed, will be identical.	of the business office of its registered
Such change was authorized by resolution duly adopted by its bauthorized by the board.	oard of directors or by an officer so 11/12/99
(Signature of an officer, chairman or vice chairman of the board)	(Date)
Aimee A. Walker, Secretary/Treasurer	
(Printed or typed name and title) Having been named as registered agent and to accept service of corporation, I hereby accept the appointment as registered age I further agree to comply with the provisions of all statutes relaperformance of my duties, and I am familiar with and accept the registered agent.	tive to the proper and complete
To make the second	11/12/99
(Signature of Registered Agent)	(Date)
If signing on behalf of an entity: David W. Marshall,	Registered Agent
(Typed or Printed Name)	(Capacity)
* * * FILING FEE: \$35.00 *	* * *

CR2E045(7/97)

DIVISION OF CORPORATIONS

P.O. Box 6327

Tallahassee, FL 32314