522117

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(Ad	ldress)	
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(Cit	ry/State/Zip/Phone	e #)
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SECRETARY OF STATE
AND ANASSEE, FLORIDA

R.A. Change

NOV 0 3 2005

COVER LETTER

Division of Corporations			
SUBJECT: Sam A. Mackie, P.A. (Name of Corporation)		
DOCUMENT NUMBER: \$22117			
The enclosed Statement of Change of Registered Office/Agent and	nd fee are submitted for filing.		
Please return all correspondence concerning this matter to the following	lowing:		
Sam A. Mackie			
(Name of Contact Person	on)		
Sam A. Mackie, P.A.			
(Firm/Company)			
122 S. Bumby Avenue, Suite (Address)	A		
Orlando, FL 32803 (City/State and Zip Cod			
•	ie)		
For further information concerning this matter, please call:			
Sam A. Mackie at (40 (Name of Contact Person) (Arc	7) 894-0820 ea Code & Daytime Telephone Number)		
Enclosed is a \$35.00 check made payable to the Department of St	tate.		
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

statement of chan	rovisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this ege is submitted for a corporation organized under the laws of the State of <u>Florida</u> to change its registered office or registered agent, or both, in the State of Florida.
	e corporation: Sam A. Mackie, P.A.
2. The principal of	office address: 550 N. Bumby Ave, Suite 220
	Orlando, FL 32803
3. The mailing ad	dress (if different):
4. Date of incorpo	oration/qualification: 01/02/1991 Document number: S22117
5. The name and : Florida Departs	street address of the current registered agent and registered office on file with the ment of State:
	ment of State: Sam A. Mackie AEE Sam A. Mackie
-	550 N. Bumby Avenue, Suite 220
_	Orlando, FL 32803
6. The name and (if changed):	orlando, FL 32803 Street address of the new registered agent (if changed) and /or registered office
-	Sam A. Mackie
-	122 S. Bumby Ave. Suite A (P.O. Box NOT acceptable)
-	Orlando, FL 32803
as changed will b	
Such change was authorized by the	s authorized by resolution duly adopted by its board of directors or by an officer so e board, or the corporation has been notified in writing of the change.
Signatur	Sam A. Mackie, President (Printed or typed name and title)
I further agree to of my duties, and document is bein	he appointment as registered agent and agree to act in this capacity. I comply with the provisions of all statutes relative to the proper and complete performance I am familiar with and accept the obligation of my position as registered agent. Or, if this I g filed merely to reflect a change in the registered office address, I hereby confirm that the been notified in writing of this change.
- Ow	October 31, 2005 (Date)
If signing on beh	alf of an entity:
Sam A. M	
(T ₎	/ped or Printed Name) * * * FILING FEE: \$35.00 * * *
	FILMING FREE GOODS

Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314