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SEURETARY OF STATE FALLAHASSEE, FLORID

COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: Tab Professional Business Designs, Inc.

Name of Corporation

DOCUMENT NUMBER: K58750

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:

Alton Bradley Clinard

Name of Contact Person

Tab Professional Business Designs, Inc.

Firm/Company

8862 North Davis Hwy

Address

Pensacola, FL 32514

City/State and Zip Code

brad@officepg.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Shelby Clinard

...850 \380-38

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.15 ange is submitted for a corporation organized under tr to change its registered office or registered agen	er the laws of the State of <u></u> F	lorida	_
1. The name of t	the corporation: Tab Professional Busine	ss Designs, Inc.		
2. The principal	l office address: 8862 North Davis Highwa	ay Pensacola FL 3	2514	
3. The mailing a	address (if different):			
4. Date of incorp	rporation/qualification: June 17, 1989 Do	ocument number: K5875()	
	d street address of the current registered agent and artment of State: (If resigned, enter resigned)	registered office on file with	h the	
	Shelby L Clinard 5 Cypress Point West,	, Pensacola, Fl.31514		
	Resigned			
6. The name and street address of the new registered agen (if changed): Alton Bradley Clinard 4000 Kingberry Dr. Pensaco			JG 27 PH	SECRETARY OF S
	P.O. Box NOT acceptable		3: 55	TATE
The street address changed will	ress of its registered office and the street address of the identical.	of the business office of its	registered age	ent,
	vas authorized by resolution duly adopted by its beine board, or the corporation has been notified in	oard of directors or by an o writing of the change.		
- USignatiu	the orangetice or arrelet A Alton	H Clinard Printed or typed name and title	; <u></u>	
I further agree i performance of agent. Or, if th	t the appointment as registered agent and agree to to comply with the provisions of all statutes related my duties, and I am familiar with and accept the is document is being filed merely to reflect a chain that the gorporation has been notified in writing	tive to the proper and comp e obligation of my position ange in the registered office	as registered	
1		ıst 24, 2012		
_	gnature of Registered Agent	Date		
If signing on be	ehalf of an entity: By L. Olivard Typed or Printed Name			

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