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03 OCT - 9 PM 5:38
TALLAHASSEE, FLORIDA

BURR & FORMAN LLP

ATTORNEYS AND COUNSELORS

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Atlanta, Georgia 30308

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(404) 817-3244 (Fax)

October 8, 2003

VIA FIRST CLASS MAIL

Florida Department of State
Amendment Section
Division of Corporations
409 E. Gaines St.
Tallahassee, FL 32399

Re: Ocmulgee Consulting, Inc., Inc., Document No. P01000081921

Dear Sir/Madam:

Please process the enclosed Change of Registered Agent form. A check in the amount of \$35.00 payable to the Department of State is enclosed for the processing fee.

Please notify the undersigned at 404/685-4327 if there are any questions.

Sincerely,



Lori Tipson
Legal Secretary

/lat
Enclosures

Birmingham
SouthTrust Tower
420 North Twentieth Street, Suite 3100
Birmingham, Alabama 35203
(205) 251-3000
159246

Montgomery
RSA Tower
201 Monroe Street, Suite 1950
Montgomery, Alabama 36104
(334) 241-7000

Atlanta
One Georgia Center
600 West Peachtree Street, Suite 1200
Atlanta, Georgia 30308
(404) 815-3000

Jackson
210 East Capitol Street
Suite 2120
Jackson, Mississippi 39201
(601) 355-3434

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Ocmulgee Consulting, Inc.
(Name of corporation)

DOCUMENT NUMBER: P01000081921

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:

Kathryn Bouchillon
(Name of person)

Burr & Forman LLP
(Name of firm/company)

600 West Peachtree Street, Suite 1200
(Address)

Atlanta, GA 30308
(City/state and zip code)

For further information concerning this matter, please call:

Kathryn Bouchillon at (404) 685-4280
(Name of 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
409 E. Gaines Street
Tallahassee, FL 32399

***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: Ocmulgee Consulting, Inc.
- 2. The principal office address: 140 Griffin Avenue, Port St. Joe, FL 32456
- 3. The mailing address (if different): P.O. Box 1210, Port St. Joe, FL 32457
- 4. Date of incorporation/qualification: 7/30/01 Document number: P01000081921

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

Curt Braswell
3744 Windlings Lake Circle
Orlando, FL 32835

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

John R. Moody
140 Griffin Avenue
(P.O. Box or personal mailbox NOT acceptable)
Port St. Joe, FL 32456

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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.

John R. Moody (Signature of an officer, chairman or vice chairman of the board) John R. Moody, President (Printed or typed 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.

John R. Moody (Signature of Registered Agent) 10-6-05 (Date)

If signing on behalf of an entity: _____ (Capacity)

(Typed or Printed Name)

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