## 404040

•						
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DIVISION OF CORPORATIONS

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10/10/08

## **COVER LETTER**

TO: Amendment Section Division of Corporations
SUBJECT: ENTOL INDUSTRIES Me (Name of Corporation)
DOCUMENT NUMBER: 464640
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:
SANDRA SCHUMACHER (Name of Contact Person)
ENTOL INDUSTRIES INC. (Firm/Company)
/200 NW 4 ST (Address)
HOMESTEAD FL. 33030-5622 (City/State and Zip Code)
For further information concerning this matter, please call:
SANDRA SCHUMACHER at (3.5) 247-/// (Name of Contact Person) at (3.5) 247-/// (Area Code & Daytime Telephone Number)
Enclosed is a \$35.00 check made payable to the Department of State

\$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

•		•	2, 607.1508, or 617.1508,		, this
	-	•	ized under the laws of the red agent, or both, in the .	•	
<i>m orae</i>	r to change us regis	stereu ojjice or registe	rea agent, or both, in the t	siale of Pioriaa.	
1. The name of t	the corporation:	ENTOL IN	IDUSTRIES, INC	· .	
2. The principal	office address:	1200 NW 4	57.		
	·	HOMESTEAD	FL 33030-5	622	<u></u>
3. The mailing a	ddress (if different)	):		<del></del>	
4. Date of incorp	oration/qualificatio	on: <u>11 05/19</u>	74 Document number:	464640	<u>)                                    </u>
		ne current registered ag resigned, enter resigned	gent and registered office of d)	on file with the	
	JENNIS	FER A MARC	solis, Esq		a da
	1533	SUNSET DR	STE 225	<del></del>	SEC DIVISI
	CORAL	GABLES FL	33143	<del>_</del>	発展
6. The name and (if changed):	street address of th	ne new registered agen	t (if changed) and /or regis	stered office	SECRETARY OF STATE VISION OF CORPORATION
	SAND	DRA SCHUM	AC.HER_	<del></del>	ATTE ATTE
	1200	O NW 4 ST (P.O. Box NOT acceptable)			<b>6</b> 5
	HON	MESTEAD !	<u> 72 33030-562</u>	2	
The street addre	ess of its registered be identical.	office and the street	address of the business of	ffice of its regist	ered agent,
Such change was authorized by the	as authorized by res ne board, or the cor	solution duly adopted rporation has been no	l by its board of directors tified in writing of the ch	or by an officer ange.	so
(Signatu	La Klums ire of an officer or director	ecler_	SANDRA SC.	HUMACHE	R, PRES, TREAS
I hereby accept I further agree to of my duties, an document is beil corporation has	the appointment as to comply with the d I am familiar wit ng filed merely to r been notified in w	s registered agent and provisions of all stati ih and accept the obli reflect a change in the priting of this change.	d agree to act in this cape tes relative to the proper gation of my position as e registered office addres	acity. r and complete p registered agent ss, I hereby confi	performance Or, if this irm that the
- And	gnature of Registered Agen	ent)	12 · 10 · 08	ie)	
If signing on be	half of an entity:				
	NOUSTRIES,	INC			
π)	vined or Printed Name)				

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

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