## F98237

(Requestor's Name)				
(Address)				
(Ac	idress)	»		
(City/State/Zip/Phone #)				
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	of Status		
Special Instructions to Filing Officer:				
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Office Use Only



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SECRETARY OF STATE

08 FEB 22 AM 9: 25

## **COVER LETTER**

TO: Amendmen Division of	nt Section f Corporations				
SUBJECT:	Moccasin Creek Enterp	rises, Inc.			
	(Name of Co	rporation)			
DOCUMENT NU	MBER:F98237				
The enclosed States	ment of Change of Registered Office/	Agent and fee are submitted for filing.			
Please return all co	rrespondence concerning this matter	to the following:			
		-			
	Wenee Winkler				
•	Renee Winkler (Name of Cont	tact Person)			
_	Moccasin Creek	Enterprises, Inc.			
	(Firm/Cor	mpany)			
4000 Vaill Point Terrace					
(Address)					
	St Angustine	pt. 32086			
_	St. Augustine, FL 32086 (City/State and Zip Code)				
For further information concerning this matter, please call:					
ror turmer informa	tion concerning this matter, please ca	III.			
	Winkler	at (904) 797-3357 (Area Code & Daytime Telephone Number)			
(Na	me 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	Street Address:			
	Amendment Section Division of Corporations	Amendment Section Division of Corporations			
	P.O. Box 6327	Clifton Building			
	Tallahassee, FL 32314	2661 Executive Center Circle			

Tallahassee, FL 32301

CR2E045 (8/05)

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of change is subn	of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statute, nitted for a corporation organized under the laws of the State of $_{ m Flo}$ c its registered office or registered agent, or both, in the State of Florida.	rida
1. The name of the corporat	Marana and Carana Toutanna and T	
2. The principal office addr	4000 Voill Doint Compac	
2. The principal office audi	St. Augustine, FL 32086	
3. The mailing address (if d	lifferent):	
4. Date of incorporation/qua	alification:09/03/1982 Document number: F98237	
5. The name and street addr Florida Department of St	ress of the current registered agent and registered office on file with the tate:	
Do	onald A. Winkler	<b>ω</b> _
40	000 Vaill Point Terrace	08 FEB
St	t. Augustine, FL 32086	N whene
6. The name and street addr (if changed):	ress of the new registered agent (if changed) and /or registered office	
Re	enee F. Winkler	) : 25
40	000 Vaill Point Terrace	,
-	(P.O. Box NOT acceptable)	
St	. Augustine, FL 32086	
The street address of its reas changed will be identicated	gistered office and the street address of the business office of its regis	stered agent,
Such change was authorized authorized by the board, or	ed by resolution duly adopted by its board of directors or by an office r the corporation has been notified in writing of the change.	er so
Recues F.	Renee F. Winkler, PTS (Printed or typed name and title)	D'.
I hereby accept the appoin I further agree to comply w of my duties, and I am fam document is being filed me corporation has been notif	stment as registered agent and agree to act in this capacity, with the provisions of all statutes relative to the proper and complete iliar with and accept the obligation of my position as registered agent the registered office address, I hereby confied in writing of this change.	performance it. Or, if this firm that the
Renée F. M.	Vinkle February 16, 2008  Stered Agent) (Date)	<del></del>
If signing on behalf of an e		
(Typed or Printed	d Name)	

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (8/05)