H73340

(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		
Special instructions to Filing Officer.		

Office Use Only



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COVER LETTER

TO: Amendment Section Division of Corporations			
SUBJECT: Triple T, Inc.			
Name of Corporation			
DOCUMENT NUMBER: H73340			
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:			
Mona Zaguri			
Name of Contact Person			
Triple T, Inc.			
Firm/Company			
1314 E. Las Olas Blvd. (#1300)			
Address			
Ft. Lauderdale, FL 33301			
City/State and Zip Code			
3t@3t.bz			
E-mail address: (to be used for future annual report notification)			
For further information concerning this matter, please call:			
Mona Zaguri ,954 ,8396611			
Mona Zaguri Name of Contact Person at (954) 8396611 Area Code & Daytime Telephone Number			
Name of Contact Person Area Code & Daytime Telephone Number			
Enclosed is a \$35.00 check made payable to the Department of State.			
Mailing Address: Street Address:			

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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, 607.1508, or 617.1508, Florida Statutes, this ange is submitted for a corporation organized under the laws of the State of Florida ler to change its registered office or registered agent, or both, in the State of Florida.	
1. The name of 2. The principal	the corporation: Triple T, Inc. al office address: 1314 E Las Olas Blvd. (#1300) lerdale, FL 33301	_ _
3. The mailing a	address (if different): Same	—
4. Date of incor	prporation/qualification: 08-28-1985 Document number: H73340	
5. The name an	nd street address of the current registered agent and registered office on file with the artment of State: (If resigned, enter resigned)	
	Mona Zaguri	
	1705 Andros Isle (Apt. M1)	
	Coconut Creek, FL 33066	
6. The name an (if changed):	nd street address of the new registered agent (if changed) and /or registered office	
	David Schneider 2019 Store	;;;; [
	1314 E Las Olas Blvd. (#1300)	 -
	Ft. Lauderdale, FL 33301	· -
as changed will	ress of its registered office and the street address of the business office of its registered agent,	
Such change wanthorized by the	vas authorized by resolution duly adopted by its board of directors or by an officer so the board, or the corporation has been notified in writing of the change.	
mona	Mona Zaguri - Owner Printed or typed name and title	
I hereby accept	of the appointment as registered agent and agree to act in this capacity. It is comply with the provisions of all statutes relative to the proper and complete If my duties, and I am familiar with and accept the obligation of my position as registered It is document is being filed merely to reflect a change in the registered office address, I It is the corporation has been notified in writing of this change.	
David	ignature of Resistered Agent Date	
If signing on be	ehalf of an entity:	
Triple T, In	TC.	
T	Typed or Printed 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