## NO200005767

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SECRETARY OF STATE OF CORPORATIONS OF CORPORATIONS

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## **COVER LETTER**

TO: Amendment Section Division of Corporations
SUBJECT: Graffstream Cruandian Angels Pottweiler Rescue, INC.
DOCUMENT NUMBER: NO20005767
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:
Grace Acosta (Name of Contact Person)
(Firm/Company)
2950 S.W. 103 Avenue
Miani Fl 33145 (City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Contact Person) at (305) 551-8664  (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

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
1. The name of the corporation: Fulfstram Grandian Angel Rothweiler Rasch.  2. The principal office address: 2450 S.W. 103 Quenue.  Minni: [5] 33465
3. The mailing address (if different): 59 Men
4. Date of incorporation/qualification( <u>July 3002</u> Document number: <u>NO200005767</u> 5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
CRESPON Catherine  1101 S-Andrews Ave Fort Landredgle [-] 33316  6. The name and street address of the new registered agent (if changed) and for registered office (if changed):  Acasta, Creace  2950 S.W. 103 Avenue  (P.O. Box NOT acceptable)  Man: F 33/65
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.  (Signature of an officer or director)  Thereby 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.
(Signature of Registered Agent)  If signing on behalf of an entity:  (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
CR2E045 (8/05)