(Requestor's Name)	<del></del>				
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT	] MAIL				
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Stat	ບຣ				
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12/28/09--01029--016 \*\*35.00

## **COVER LETTER**

TO:	TO: Amendment Section Division of Corporations								
SUBJE	ECT:WI	niskers &					Cou	nty; Inc.	
				Name of 0	Corpora	ation			
DOCU	MENT NUMB	SER:NO	60000	10441					
The en	closed Statemen	t of Change o	f Regis	tered Offic	ce/Age	nt and fe	ee are	submitted for filing.	
	return all corres	-	-		-			•	
110000		pondeno con	9	,					
		Nancy D	. War	ner Jame of Co	ontact F	erson			
			•		J11440C 1	013011			
				Firm/C	ompan	v	·		
				1 maz	ompan	7			
		57365 M	<u>orton</u>	Street	denna				
				Au	uress				
	····	Marathon,	Monr	oe Coun	ty F	L 330	)50		
				ity/State a	ına Zıp	Code			
		Nancy@rew	arner	law.com					
						annual	repo	rt notification)	
			`				•	,	
For fur	ther information	concerning t	his mat	ter, please	call:				
	C	Chris Kafe	r		_ 4	706	,	270_2280	
		of Contact Per	_		at (	Area C	ode &	270-3289 Daytime Telephone Number	
								•	
Enclos	ed is a \$35.00 cl	heck made pay	yable to	the Depa	rtment	of State.			
		Mailing Ad	dress:			Str	eet A	ddress:	
		Amendmer	it Secti	on				ment Section	
		Division of	f Corpo	orations		Div	/isioi	n of Corporations	
		P.O. Box 6	-					Building	
		Tallahasse	e, FL 3	2314				Recutive Center Circle	
			•					ssee, FL 32301	

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

	atement of change i	is submitted j	ons 607.0302, 617.0302, 607.1308, or 617.1308, Florida Statut for a corporation organized under the laws of the State of $\frac{F1c}{c}$	orida						
1	The name of the co		sistered office or registered agent, or both, in the State of Florid Whiskers & Paws Forever of Monroe County, 1							
	The principal offic	•	570(5 M ) 0.							
۷.	rne principal offic	e address	Marathon, Florida 33050	<u></u>						
3.	The mailing addre	ss (if differer	t):							
4.	Date of incorporat	ion/qualifica	ion: 10/5/06 Document number: N06000010	)441						
5.			the current registered agent and registered office on file with the resigned, enter resigned)	;						
	I	Douglas B	. Wolk RESIGNED							
		548 30th	St. Ocean	2006 54						
		Marathon,	FL 33050	2009 DEC SECRET						
6.	The name and stre (if changed):	et address of	the new registered agent (if changed) and /or registered office	28 ABY ASS						
		Nancy D.	Warner	AM IO: 33 OF STAFE EF, FLORIDA						
		57365 Mor	P.O. Box NOT acceptable	33 NBA						
Tas	he street address of changed will be	f its registere dentical.	ed office and the street address of the business office of its reg	istered agent,						
Si	uch change was au athorized by the bo	thorized by ard, or the c	resolution duly adopted by its board of directors or by an office or or or by an office or or or the change.	er so						
_	Signature of a	n officer or direc	NANCY D. WARNER, PRES.  Printed or typed name and title	<del> </del>						
I i Oj de ce	hereby accept the c further agree to co fmy duties, and I a ocument is being fi orporation has bee	appointment mply with th m familiar v led merely to n notified in	as registered agent and agree to act in this capacity. e provisions of all statutes relative to the proper and complet with and accept the obligation of my position as registered ago o reflect a change in the registered office address, I hereby co writing of this change.	e performance ent. Or, if this nfirm that the						
	Signature	of Registered A	$\frac{12/\lambda_1/09}{\text{Date}}$							
lf	signing on behalf		•							
	NANCY D. WARN									
_	Typed o	or Printed Name	**************************************							

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