P06000030738

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SECRETARY OF STATE

P\$/27/06

COVER LETTER

TO:	Amendment Section Division of Corporations	•	
SUBJI	ECT: Pinecrest Pet Wellness Center, In (Name of Co		
DOCU	MENT NUMBER: P06000030738		
The en	closed Statement of Change of Registered Office	Agent and fee are submitted for filing.	
Please	return all correspondence concerning this matter	to the following:	
	Don J. Harris, DVM		
(Name of Contact Person)			
	Pinecrest Pet Wellness Center, (Firm/Cor		
	12121 S. Dixie Hwy.	ess)	
	Miami, FL 33156		
For fur	(City/State and ther information concerning this matter, please ca	*	
Don J	. Harris, DVM (Name of Contact Person)	at (305) 234-2473 (Area Code & Daytime Telephone Number)	
Enclos	ed is a \$35.00 check made payable to the Departm	nent 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	

TO:

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 statement of change is submitted for a corporation organized under the laws of the	•
in order to change its registered office or registered agent, or both, in the	State of Florida.
1. The name of the corporation: Pinecrest Pet Wellness , INC .	<u> </u>
2. The principal office address: 12121 S. Dixie Hwy., Miami, FL 33156	
3. The mailing address (if different):	-
4. Date of incorporation/qualification: March 02, 2006 Document number:	P06000030738
5. The name and street address of the current registered agent and registered office Florida Department of State:	on file with the
Corporation Service Company	
1201 Hays Street	
Tallahassee, FL 32301	OS AF
The name and street address of the new registered agent (if changed) and /or reg (if changed):	of APR 24 PM 1:53
Don J. Harris, DVM	
12121 S. Dixie Hwy.	ଫ ବି ଜ
(P.O. Box NOT acceptable)	
Miami, FL 33156	· · · · · · · · · · · · · · · · · · ·
The street address of its registered office and the street address of the business as changed will be identical.	office of its registered agent,
Such change was authorized by resolution duly adopted by its board of director authorized by the board, or the corporation has been notified in writing of the c	s or by an officer so hange.
Don J. Harris, DVM	
[Printed of type of an officer or director] I hereby accept the appointment as registered agent and agree to act in this call further agree to comply with the provisions of all statutes relative to the proposition of my duties, and I am familiar with and accept the obligation of my position as document is being filed merely to reflect a change in the registered office address corporation has been notified in writing of this change.	ay and agranista naufayanana
Signature of Registered Agent) (D	ate)
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)