

P98000010890

(Requestor's Name)

(Address)

(Address)

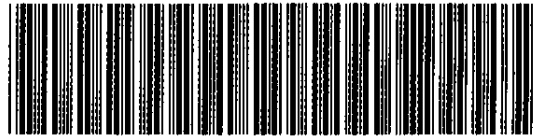
(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_



600118608426

02/25/08--01049--004 \*\*35.00

FILED  
08 FEB 25 PM 4:20  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Special Instructions to Filing Officer:

LORI  
BAWMAN  
gave permission to  
correct the  
PA name  
Dc.

Office Use Only

2/27/08

PA Changl

02/27/08  
Dc

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Florida Falls Enterprises, Inc.  
(Name of Corporation)

**DOCUMENT NUMBER:** P98000010890

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:

Lori Bowman  
(Name of Contact Person)

Florida Falls Ent., Inc.  
(Firm/Company)

P.O. Box 2618  
(Address)

Stuart, FL 34995  
(City/State and Zip Code)

For further information concerning this matter, please call:

Lori Bowman at (772) 519-1486  
(Name 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  
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 Florida in order to change its registered office or registered agent, or both, in the State of Florida.

- 1. The name of the corporation: Florida Falls Enterprises, Inc.
- 2. The principal office address: P.O. Box 2618 3107 SE. Glasgow Dr. Stuart, FL 34997
- 3. The mailing address (if different): P.O. Box 2618 Stuart, FL 34995
- 4. Date of incorporation/qualification: Feb. 2, 1998 Document number: P9800010890
- 5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:


All Florida Firm, Inc  
813 Deltona Blvd, Ste A  
Deltona, FL 32725

FILED  
 08 FEB 25 PM 4:20  
 SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

- 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
- Timothy J. Bowman  
3107 SE. Glasgow Dr.  
(P.O. Box NOT acceptable)  
Stuart, FL 34997

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)

Timothy J. Bowman, Owner  
(Printed or typed name and title)

*I hereby 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)

2.20.08  
(Date)

If signing on behalf of an entity:  
Timothy J. Bowman  
(Typed or Printed Name)

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