## 149095

(Requestor's Name)		
(Address)		
(Address)		
(Cit	ty/State/Zip/Phon	e #)
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SLORETARY OF STATE TALLAHASSEE, FLORIDA

FILED 07 MAR 20 AM 9: 37

## **COVER LETTER**

	mendment Section ivision of Corporations	
SUBJECT	r: Culver Corporation Inc	rnoration
	(Name of Co	ipotation)
DOCUMI	ENT NUMBER: 149095	
The enclos	sed Statement of Change of Registered Office.	Agent and fee are submitted for filing.
	urn all correspondence concerning this matter	
	Jacqueline Culver Simpson	
	(Name of Con	tact Person)
	Culver Corporation Inc	
	(Firm/Co	npany)
	19930 NW 9th Drive	
	(Addr	ess)
	Pembroke Pines, FL 33029	
	(City/State and	d Zip Code)
For further	r information concerning this matter, please ca	all:
lacquelin	e Culver Simpson	at ( 305 ) 807-1538
Jacqueiiii	(Name of Contact Person)	at (305) 807-1538 (Area Code & Daytime Telephone Number)
Enclosed i	is a \$35.00 check made payable to the Departr	ment of State.
	Mailing Address:	Street Address:
	Amendment Section	Amendment Section
	Division of Corporations	Division of Corporations
	P.O. Box 6327	Clifton Building
	Tallahassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301
		1 ananassee, 1 L 52501

TO:

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

statement of change is submitted for a corporation of	7.0502, 607.1508, or 617.1508, Florida Statutes, this organized under the laws of the State of Florida registered agent, or both, in the State of Florida.
1. The name of the corporation: Culver Corporation	Inc
2. The principal office address: 19930 NW 9th Drive	Pembroke Pines, FL 33029
3. The mailing address (if different): Same	
4. Date of incorporation/qualification: 11/02/1946	Document number: 149095
5. The name and street address of the current registe Florida Department of State:	ered agent and registered office on file with the
C. Sullivan Culver Sr.	
C. Sullivan Culver Sr.  4501 NW 33rd Ave  Miami, FL 33142  6. The name and street address of the new registered agent (if changed) and /or registered office	
Miami, FL 33142	ASSEE
6. The name and street address of the new registered (if changed):	d agent (if changed) and /or registered office
Jacqueline Culver Simpsor	1
19930 NW 9th Drive	
(P.O. Box NOT according to the Pembroke Pines, FL 33029	
	street address of the business office of its registered agent,
(Signature of an object or dector)	Jacqueline Culver Simpson (Printed or typed name and title)
I hereby accept the appointment as registered age I further agree to comply with the provisions of al of my duties, and I am familiar with and accept th document is being filed merely to reflect a change corporation has been notified in writing of this ch	ll statutes relative to the proper and complete performance to obligation of my position as registered agent. Or, if this is in the registered office address, I hereby confirm that the
Gluber Supson	3/13/ 2007
(Signature of Registered Agent)	(Date)
If signing on behalf of an entity:	
Jacqueline Culver Simpson (Typed or Printed Name)	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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