379865

(Requestor's	s Name)
(Address)	
(Address)	
(City/State/Z	ip/Phone #)
PICK-UP V	VAIT MAIL
(Business E	ntity Name)
(Document	Number)
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SECRETARY OF STATE SECRETARY OF CORPORATIONS

COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: SANDBERN /NC (Name of Corporation)
DOCUMENT NUMBER: 379865
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:
SANDRA SCHUMACHER (Name of Contact Person)
SANDBERN NC. (Firm/Company)
1200 NW 4 5T (Address)
HOMESTEAD FL 33030-5622 (City/State and Zip Code)
For further information concerning this matter, please call:
SANDRA SCHUMACHER at (305) 247-/// (Name of Contact Person) at (305) 247-/// (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: SANDBERN INC.	
2. The principal office address: 1200 NW 45T	
HOMESTEAD FL 33030-5622	
3. The mailing address (if different):	
4. Date of incorporation/qualification: 4-5-71 Document number: 379865	
4. Date of incorporation/qualification: 4-5-71 Document number: 379865 5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)	
JENNIFER A MARGOLIS, ESQ	
1533 SUNSET DR STE 225	
Miami, Fr 33143	
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):	
SANDRA SCHUMACHER	
1200 NW 4 ST	
(P.O. Box NOT acceptable)	
HOMESTERD FL 33030-5622	
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) SANDRA SCHUMACHER RES/TEEAS	
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) (Date)	
(Signature of Registered Agent) (Date) If signing on behalf of an entity:	
(Typed or Printed Name)	

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