

A05000001373

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

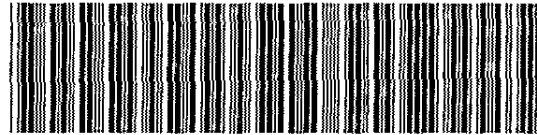
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 20, 2007

CLAUDE DUBE
5336 BOCA MARINA CIRCLE NORTH
BOCA RATON, FL 33487

SUBJECT: DUBE DEVELOPMENT LTD.
Ref. Number: A05000001373

We have received your document for DUBE DEVELOPMENT LTD. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

There is a balance due of \$17.50.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6097.

Marsha Thomas
Document Specialist

Letter Number: 107A00055427

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TALLAHASSEE FLORIDA

**LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP
STATEMENT OF CHANGE OF REGISTERED OFFICE OR
REGISTERED AGENT, OR BOTH**

Pursuant to the provisions of section 620.1115, Florida Statutes, the undersigned limited partnership or limited liability limited partnership submits the following statement in order to change its registered office or registered agent, or both, in the state of Florida.

1. DUBE DEVELOPMENT LTD
Name of Limited Partnership or Limited Liability Limited Partnership
2. JULY 14, 2005 3. A05000001373
Date of filing/registration in Florida Florida document number

4. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

CORPORATION SERVICE COMPANY
Name

1201 HAYS STREET
Address

TALLAHASSEE FL 323012505 U.S.
City, State and Zip

5. The name and Florida street address of the new registered agent and/or office:

CLAUDE DUBE
Name

5336 BOCA MARINA CIRCLE NORTH
Florida street address (P.O. Box not acceptable)

BOCA RATON FL 3487
City, State and Zip

6. Such change(s) is/are effective when filed by the Florida Department of State.

Claude Dube
Signature of General Partner

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 obligations of my position as registered agent.

Claude Dube
Signature of Registered Agent

Filing Fee: \$35.00
Certified Copy (optional): \$52.50

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA