

F060000000446

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

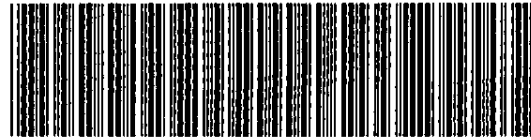
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100213155501

10/14/11--01012--001 **1385.00

OCT 14 11:11

APPRO
10/19/11
TC

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: CONDENSER PEOPLE, INC.
Name of Corporation

DOCUMENT NUMBER: F06000000446

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:

Toni Emerson
Name of Contact Person

Firm/Company

1521 Alton Rd Suite 159
Address

Miami Beach, FL 33139
City/State and Zip Code

tenewmedia@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Toni Emerson at (305) 397-8241
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: CONDENSER PEOPLE, INC.
2. The principal office address: 1200 5th Ave. S. Tin City Complex Suite 1
Naples, FL 34102
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 01/19/2006 Document number: F06000000446
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)

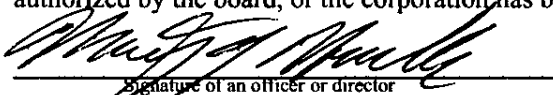
Martin Klingenberg
1455 Blue Point Ave
Naples, FL 34102

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Toni Emerson
1521 Alton Rd Suite 159
P.O. Box NOT acceptable
Miami Beach, FL 33139

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

Martin Hadle
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

08/30/2011
Date

If signing on behalf of an entity:

Toni Emerson
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)