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SECRETARY OF STATE

De Curon

EDELWEISS CORPORATION Four Embarcadero Center, Suite 4000, San Francisco, CA 94111

August 31, 2007

Division of Corporations PO Box 6327 Tallahassee, FL 32314

Re:

Edelweiss Corporation, doing business in Florida as

Edelweiss Espanola Corporation

Dear Sir or Madam:

Attached is a Statement of Change of Registered Agent for the above referenced company, along with a check in the amount of \$35.00 to cover the filing fees.

If there are any questions, please do not hesitate to contact me at 415-248-1595 or mrhoads@grmslaw.com.

Very truly yours,

Mary V. Rhoads

Treasurer

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 <u>CALICOLIV</u> Ain order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: EVELWEISS COLF 2. The principal office address: 4 EMBAR CADERO CENTER ENELWEISS -ESPANDIA COLF SLUTE 4006 - SAN FRANCISCO CA 94 III 3. The mailing address (if different): SALE
4. Date of incorporation/qualification: OX 25 100 Document number:
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): MANN BEACH TEACHESTATE CONFANY
1457 DIEXEL AS (P.O. Box NOT acceptable) When 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) Mary V. Naoads Treasurer (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. 8 28 08 (Significated Agent)
If signing on behalf of an entity: RENEE SAVARY (Typed or Printed Name)

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (8/05)

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