

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H07000228812 3)))



H070002288123ABC/

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)205-0380

From

Account Name

: C T CORPORATION SYSTEM

Account Number :

FCA000000023

Phone

(850)222-1092

Fax Number

(850)878-5926

REGISTERED AGENT CHANGE

MECEIVE OUTSEP 13 AM 8: 00 SECRETARY OF STATE

THE GARDEN CITY GROUP, INC.

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$35.00

Electronic Filing Menu

Corporate Filing Menu

Hel

1.14.01

https://efile.sunbiz.org/scripts/efilcovr.exe

9/13/2007

09/13/2007 13:40 8502227615 CT CORP



September 13, 2007

FLORIDA DEPARTMENT OF STATE

Division of Corporations

THE GARDEN CITY GROUP, INC. 105 MAXESS RD. MELVILLE, NY 11747

SUBJECT: THE GARDEN CITY GROUP, INC.

REF: F07000003526

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The current name of the entity is as referenced above. Please correct your document accordingly.

Period after (INC).

If you have any questions concerning this matter, please either respond in writing or call (850) 245-6964.

Irene Albritton Document Specialist

Letter Number: 907A00054290

RE-SUBMIT

Please relain original filing

state of submission _913

P.O BOX 6327 - Tallahassee, Florida 32314

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

Pursuant to the provisions of sections 607 0502, 617 050 statement of change is submitted for a corporation organ	ized under the laws of the State of Dolaware
in order to change its registered office or registe	
The name of the corporation: IHB GARDEN CITY GR The principal office address: 105 MAXESS RD, MELV	
2 the brunchth Ortho strateges,	3.2.11
3 The mailing address (if different):	
4. Date of incorporation/qualification: 7/11/2007	Document number: F07000003526
5. The name and street address of the current registered at Florida Dopartment of State:	gent and registered office on file with the
Richard Cohen	
1792 BELL TOWER LANE, SUITE 101	
WESTON FL 33326 US	
6 The name and street address of the new registered agen (if changed):	t (if changed) and /or registered office
C I Corporation	n System
c/o C l Corporation System, 12	00 South Pine Island Road
(P G Box NOT socsymble) Plantation, Flori	ida 33324
The street address of its registered office and the street as changed will be identical	address of the business office of its registered agent,
Such change was authorized by resolution duly adopted authorized by the board, or the corporation has been not	by its board of directors or by an officer so iffied in writing of the change
(Sugariture of an orthograph of directory)	ALLEN W. NELSON Secretary
I hereby accept the appointment as registered agent and I further agree to comply with the provisions of all statu of my duties, and I get familiar wilk and accept the oblig document is being filed merely to reflect a change in the corporation has been notified in writing of this change.	l agree to act in this capacity, tes relative to the proper and complete performance gation of my position as registered agent. Or, if this registered office address, I hereby confirm that the
By: Tale W. Manua (Signature of Registered Agent)	9/12/07
If signing on behalf of an entity: DALE W. MORRIS ASSISTANT VICE PRESIDENT (Typed or Prizad Name)	
* * * Filing Fe	E: \$35.00 * * *
Make Checks Payable 10 Floi Mail to: Division of Corporations, P.C Crze045 (8/05)	rida Department of State D. Box 6327, Tallahassee, FL 32314

PAGE 03/03

FLECK - DEFACTION C T Symme Online