## F080000001815

(Re	equestor's Name)	
(Ad	ldress)	
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(Cit	ty/State/Zip/Phone	e #)
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SECRETARY OF STATE TALLAHASSEE, FLORIDA

RD (18)

## · COVER LETTER

TO:	Amendment S Division of C	Section forporations				
SUBJ	JECT:	The Ale C	Group, Incorporation	C on		
DOC	UMENT NUM	BER:F	0800000	1815		
The e	nclosed Stateme	ent of Change of Registered O	ffice/Agent a	and fee are subm	itted for filing.	
Please	e return all corre	espondence concerning this ma	atter to the fo	ollowing:		
			hn R Ale		<u> </u>	
		Name of	Contact Per	son	<del></del>	
		The A	le Group Ir	nc		
	-		n/Company		<del></del>	
		4100 Corpora	ite Square	Ste#161		
	_		Address	-		
	_	Naple	s, FL 3410	)1		
		City/Stat	te and Zip Co	ode		
		iack@the	alegroup.c	com		
	E-mail address: (to be used for future annual report notification)					
For fi	urther information	on concerning this matter, plea	ase call:			
	Ε	Dee Ann Kieft	at (	239	963-9856	
	Name	of Contact Person	A	rea Code & Day	963-9856 time Telephone Number	
Enclo	osed is a \$35.00	check made payable to the De	epartment of	State.		
		Mailing Address: Amendment Section		Street Address Amendment S	Section	
		Division of Corporations	S	Division of C	-	
		P.O. Box 6327 Tallahassee, FL 32314		Clifton Build	ıng ve Center Circle	
		1 ananassee, FL 32314		Tallahassee,		

TO:



April 16, 2010

JOHN R. ALE THE ALE GROUP, INC. 4100 CORPORATE SQUARE - STE. #161 NAPLES, FL 34101

SUBJECT: THE ALE GROUP, INC. Ref. Number: F08000001815

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

You failed to list the registered agent information in part 6(six) of the form.

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) 245-6964.

Irene Albritton Regulatory Specialist II

Letter Number: 810A00009381



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

statement of chan	ge is submitted for a co	rporation organized	07.1508, or 617.1508, Flo under the laws of the Sta agent, or both, in the Sta	nte of Florida	
	ne corporation: The A		e, Suite #161, Naples	s, FL 34101	
***************************************	dress (if different):				
4. Date of incorporate	oration/qualification:	04/22/2008	Document number:	F08000001815	
	street address of the cur ment of State: (If resign		and registered office on	file with the	
_	John R Ale				
	8100 Sanctuary Dr	·. #1		- 5	ECAL CAL
	Naples, FL 34104			APR 21	芸芸
6. The name and (if changed):	street address of the new	v registered agent (il	f changed) and /or registe	TO APR 28 AMII: OF	OF STATE EE, FLORIDA
as changed will	be identical.		lress of the business office		t,
I herebylaccept if I herebylaccept if I further agree to of my duties, and document is being corporation has	the appointment as reg to comply with the prov. I I am familiar with an ing filed merely to reflect been notified in writing		rits board of directors of ed in writing of the chan Printed or typed flaggree to act in this capace is relative to the proper action of my position as registered office address,  Date	me and title ity. ind complete performan gistered agent. Or, if the Thereby confirm that the	ce iis ie
Ту	ped or Printed Name				

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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