## F130000002485

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(Cil	ty/State/Zip/Phone	e #)		
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JIVISION OF CORPORATIONS

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## COVER LETTER

TO: Amendment Section Division of Corporations				
SUBJECT: CHICAGO Soft, LTD., INC.  Name of Corporation				
DOCUMENT NUMBER: _ F13 00000 2485				
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:				
GREGORY O'BRIEN Name of Contact Person				
CHicAGO SOFT LTO, INC. Firm/Company				
1820 E. EDSEWOOD DR. #103 Address				
LAKELAND, FL 33803				
City/State and Zip Code				
E-mail address: (to be used for future annual report notification)				
E man address. (to be used for fatare annual report notification)				
For further information concerning this matter, please call:				
Eileen Krause at (863) 940-2066  Name of Contact Person Area Code & Daytime Telephone Number				
And 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

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

Pursuant to the p	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statu	ites, this	
•	nge is submitted for a corporation organized under the laws of the State of		
in order	r to change its registered office or registered agent, or both, in the State of Flori	da.	
1. The name of the	he corporation: CHICAGO SOFT, LTD., INC		
2. The principal	office address: 1820 E. EDGEWOOD DR. #103		
	LAKELIND, FL 33803		
3. The mailing ac	ddress (if different):		
4. Date of incorp	oration/qualification: Document number: F130000	248	<u>5</u>
	street address of the current registered agent and registered office on file with the truent of State: (If resigned, enter resigned)	ne	•
	Terri SAYON (Resigned)		
•	CHICAGO-SOFT LTD, INC		
•	1820 E. ED 950000 DR \$103		<u>;=4</u>
	1820 E. ED 98-WOOD DR \$103 LAKELAND, FL 33803	3S 4	Ones Ones Pro-
6. The name and (if changed):	street address of the new registered agent (if changed) and /or registered office	SEP 29	W F C
	GREGORY O'Brien	PH	78 G
•	CHICAGOSOFT LTO, INC	=======================================	五字
	1820 E. EDGEWOOD DR-#103	<del>-</del>	<u>S</u> 2
	LAKELAND, FL 33803		ଏ
The street addre as changed will	ss of its registered office and the street address of the business office of its reg be identical.	gistered a	gent,
Such change was authorized by the	s authorized by resolution duly adopted by its board of directors or by an office board, or the corporation has been notified in writing of the change.	er so	
Signatur	Ellen A KRAUSE Pres Printed or typed name and title	sident	_
l further agree to performance of t agent. Or. if thi	the appointment as registered agent and agree to act in this capacity: o comply with the provisions of all statutes relative to the proper and complet my duties, and I am familiar with and accept the obligation of my position as a document is being filed merely to reflect a change in the registered office ad that the corporation has been notified in writing of this change.	e registerec ldress, I	i
Sjøn	nature of Régistered Agent Date	14	
If signing on bel	half of an entity:		
Tv	rped or Printed Name		
-,	•		

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