F75/65

(Red	uestor's Name)								
. (Ado	lress)								
(Add	Iress)								
(City/State/Zip/Phone #)									
PICK-UP	☐ WAIT	MAIL '							
(Bus	iness Entity Nam	ne)							
	·	,							
(Document Number)									
Certified Copies	Certificates	of Status							
Special Instructions to Filing Officer:									
		:							

Office Use Only



100114076071

01/11/08--01015--023 **35.00

SECRETARY OF STATE FLORIDA

11509

COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Chriss Cross Enterprises and (Name of Corporation)
DOCUMENT NUMBER: F 75/65
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:
Linda L Lindsay (Name of Contact Person)
Chriss Cross Enterprises and (Firm/Company)
5423 Antoinette 5+ (Address)
SArpsota F1 34232 (City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Contact Person) at (941) 925-1643 (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 pro							• •	
statement of chang								
		gistered office of	_	_	1	- ,		
1. The name of the	corporation:_	Chriss	Cros	<u>s En</u>	berprise.	s In	<u> </u>	
2. The principal off	ice address:	5423 1	Antoin	rette	7+			
		SAMPSO	tn.	F) 3	M233	2		
3. The mailing add	ress (if differe	nt):						
4. Date of incorpor	ation/qualifica	tion: <u>4/6</u>	/82	_ Documen	t number:	F751	65	
5. The name and st Florida Departm		the current regi	stered agen	t and registe	red office on	i file with the	;	
	Linda	L. Lin	dsay					
	1400	Cattlemo	er i	Road	Ste	: <i>A</i>		
	SArAS	ota Fl	342	132		TAT:	2008	
6. The name and st (if changed):					nd /or registe	CRETAS	L NAC	
_	LINDA	1 2 /	ndsa	.\/		1338 10 A	- PH	
_	5423	Anto (P.O. Box NOT:	ine to	te St	/-	FLOR	ယ္	
	SArA.	sota F	=/ 3 4	1232			0 t	
The street address as changed will be	of its register identical.	ed office and the	e street ado	lress of the	business off	ice of its reg	istered a	agent,
Such change was a authorized by the	authorized by board, or the o	resolution duly corporation has	adopted by been notifi	vits board o	of directors og of the char	or by an officinge.	er so	
Kicken N (Signature	I an officer or dire	ector)		Rich	ACG	name and title)	<u> </u>	7-1
I hereby accept the I further agree to o of my duties, and I document is being corporation has be	e appointment comply with the am familiar t filed merely t een notified in	as registered a ne provisions of with and accept o reflect a chan writing of this						
Jin Ua (Signal	L Ling	Yas			/-5	-08		
If signing on beha		\cup			(246)	,		
Linda	L. Line	Yazy						
(Тур-	ed 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 * * *