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## **COVER LETTER**

SUBJECT:	TO:	Amendment S Division of Co	ection orporations	<b>S</b>		
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:  (Name of Contact Person)  LONDATION LONDATION CHAPS  (Firm/Company)  1201 Hays Snext  (Address)  TAUAHISSEE, FL 32301  (City/State and Zip Code)  For further information concerning this matter, please call:  (Name of Contact Person)  at (BB 240-BbB 250-492)  (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  Street Address: Amendment Section Division of Corporations	SUBJEC	CT:	9008	GAOUP	FAKONI	onated)
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:  (Name of Contact Person)  (Name of Contact Person)  (Firm/Company)  (Firm/Company)  (Address)  TAUAHASSEE F2 3230/ (City/State and Zip Code)  For further information concerning this matter, please call:  (Name of Contact Person)  (Name of Contact Person)  at (BIB) 240-BBB 250-4-90-4-90-4-90-4-90-4-90-4-90-4-90-4-	00202			(Nan	ne of Corporation	on)
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(Name of Contact Person)  CONDITION SAVICE COMPANY  (Firm/Company)  120   Hays SAVET  (Address)  TAUAHISSEE, FL 3230   (City/State and Zip Code)  For further information concerning this matter, please call:  (Name of Contact Person)  at (B/B) 240 8688 20 4 902  (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  Division of Corporations	The enc	losed Statemer	nt of Chan	ge of Registered	d Office/Agent	and fee are submitted for filing.
Conformation   Company	Please re	eturn all corres	spondence	concerning this	matter to the f	ollowing:
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TAUAHASSEE, FZ 3230/ (City/State and Zip Code)  For further information concerning this matter, please call:    VICTOR   LAWOWN   at (B/B) 240 8668 20 4920 (Name of Contact Person)   (Area Code & Daytime Telephone Number)  Enclosed is a \$35.00 check made payable to the Department of State.    Mailing Address: Amendment Section   Amendment Section   Division of Corporations   Division of Corporations		<del>-</del> -		(F	irm/Company)	,
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Mailing Address:  Amendment Section  Division of Corporations  Street Address:  Amendment Section  Division of Corporations		(Name	of Contac	t Person)	at (	Area Code & Daytime Telephone Number)
Division of Corporations Division of Corporations	Enclosed	d is a \$35.00 c	heck made	e payable to the	Department of	State.
Tallabassee FL 32314 2661 Executive Center Circle			Division P.O. Bo	n of Corporati ox 6327		Amendment Section Division of Corporations Clifton Building

Tallahassee, FL 32301

## 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 LAUFONNIA
in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: 9008 GROVP, FUCGREDATED
2. The principal office address: 1999 W - 1907H STATET
TOARANCE CA 90504
3. The mailing address (if different): P-O - BOX 29048
GUENDOLE, CA 91209-9048
4. Date of incorporation/qualification: 08/15/1978 Document number: F9900005157
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
GHADWICK, ANNA
2000 MONTANA AVE %
SAINT PETETUSBURG FL 33793
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):  **LOUISMATION VENUICE LONDONY  8
1201 HAYS STATET
(P.O. Box NOT acceptable)  IPUNHASSEE FL 32301
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, of the corporation has been notified in writing of the change.
Junie Draw of an officer or dipositor)  Apoice B fowary - President (Printed or typed marrie and title)
I kereby accept the appointment as registered agent and agree to act in this capacity. If 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.
(Signature of Registered Agent)  2/16/08 (Date)
If signing on behalf of an entity:
1/ 1. * 1. *
Karen M. Dyer HSSI. Sec.

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