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COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: ENTERPRISES OF HOLLY WODD, TNC Name of Corporation
DOCUMENT NUMBER: K18393
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:
KIMPERLY P. THORN TON Name of Contact Person
ENTERPRISES OF HOLLYWOOD INC.
Po Box 855 Address
BON. TA SPRINGS FL 34133 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Contact Person at (239) 596 4088 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

Clifton Building

Tallahassee, FL 32301

2661 Executive Center Circle

P.O. Box 6327

Tallahassee, FL 32314

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 Figura in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: ENTERPRISES OF HOLLY WOOD INC
2. The principal office address: POBOX 855 BONITA SPRINGS FL 341.33
3. The mailing address (if different):
4. Date of incorporation/qualification: 3 188 Document number: L 18393
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)
STEPHEN LOWITZ
1715 MONROE STREET
Fr. MYERS FL 33902 00 2
6. The name and street address of the new registered agent (if changed) and /or registered file (if changed):
HE REGISTERED AGENTS, LLC SO TO THE
1715 MONPOE STREET
P.O. Box NOT acceptable FT S
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, or the corporation has been notified in writing of the change.
Roberto Bour PRESIDENT Signature of an officer of director Printed or typed name and title
I hereby accept the appointment as registered agent and agree to act in this capacity. I 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 Signature of Registered Agent Date
If signing on behalf of an entity:
ERIN E. Houck-Toll, Vice-President Typed or Printed Name
Typed 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 * * *

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