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103-30461 OK

## TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: (Name of corporation)
DOCUMENT NUMBER: 0 3000 0 30 46 \
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:
Toane (Name of person)
(Name of firm/company)
3777 Covert Columb
Bora Ruto FL 33496 (City/state and zip code)
For further information concerning this matter, please call:
Name of person) Lupt at (The Opn - 4000 (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
409 E. Gaines Street
Tallahassee, FL 32399

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the limited liability company is:
2. The mailing address of the limited liability company is: 3777 (went when
Bocu Daton, FL 33496
8.15.03  3. Date of filing/registration in Florida  LO30005046  4. Document number
5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:
Harvey wholider Esq 1900 (or Durate Dive, Ste 30) Wes Born Raddress
Bola City, State and Zip \$3431
6. The name and address of the new registered agent and/or office:
GARY KURSTIN
Name 79/7 GLEN NEVIS TERR  Florida street address (P.O. Box NOT acceptable)
BOC O Communication of the com
City, State and Zip
If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.
(Signature of a member or authorized representative of a member)
(Printed or typed name of signee)
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 obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

**FILING FEE: \$25.00** 

INHS18(10/99)