## m51692

(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
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## \* COVER LETTER

Amendment Section

TO:

Division of Gorporations	• •
Ogawa & Co., USA, Inc.	
SUBJECT: Name of Corpo	pration
M51692	nution .
DOCUMENT NUMBER:	
The enclosed Statement of Change of Registered Office/A	gent and fee are submitted for filing.
Please return all correspondence concerning this matter to	the following:
Suzanne Schaeffer	
Name of Contac	t Person
Ogawa & Co, USA, Inc.	
Firm/Comp	any
1230 SE 7th Avenue	
Address	
Pompano Beach, FL 33060	
City/State and 2	ip Code
suzanne@ogawausa.com	
E-mail address: (to be used for future	re annual report notification)
For further information concerning this matter, please call	:
Suzanne Schaeffer	954- 781-6223
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a \$35.00 check made payable to the Departme	nt of State.
Mailing Address:	Street Address:
Amendment Section Division of Corporations	Amendment Section Division of Corporations
P.O. Box 6327	Clifton Building
Tallahassee, FL 32314	2661 Executive Center Circle

Tallahassee, FL 32301

, ,	BOTH FOR CORI	PORATIONS	
statement of cha	nge is submitted for a corporation organi	2, 607.1508, or 617.1508, Florida Statutes, this ized under the laws of the State of FL ered agent, or both, in the State of Florida.	
1 TI	Ogawa & Co., USA,	Inc.	
1. The name of the	1230 SE 7th Avenue		_
2. The principal Pompano	office address:		
3. The mailing a	ddress (if different):		
4. Date of incorp	ocration/qualification:	M51692  Document number:	
	street address of the current registered ag tment of State: (If resigned, enter resigned	gent and registered office on file with the d)	
	Donald R. Schaeffer -RESIGNED	)	
	1230 SE 7th Avenue		
	Pompano Beach, FL 33060		
6. The name and (if changed):	street address of the new registered agen		
	Suzanne Schaeffer	FILED FILED	
	1230 SE 7th Avenue	acceptable 22.50	
	P.O. Box NOT	acceptable RIO	
The street addre	ess of its registered office and the street a be identical.	address of the business office of its registered agent	ţ,
Such change wa authorized by th	s authorized by resolution duly adopted to board, or the corporation has been not	by its board of directors or by an officer so tified in writing of the change.	
Susan	re of an officer of freedor	Suzanne Schaeffer, President	
I herehv accent	the appointment as registered agent and	d agree to act in this capacity. utes relative to the proper and complete ccept the obligation of my position as registered ect a change in the registered office address, I n writing of this change.	
Su	zano Selaspe	08/25/2015	
Sign	Mure of Registered Agent	Date	

Suzanne Schaeffer

Typed or Printed Name

If signing on behalf of an entity:

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