## M61925

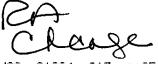
(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
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Special Instructions to Filing Officer:			
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SECRETARY OF STATE
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## **COVER LETTER**

	dment Section on of Corporations	•		
SUBJECT: S	Sub-Gard-East, Inc (Name of Corp	poration)		
DOCUMENT	NUMBER: M61925			
The enclosed S	Statement of Change of Registered Office/A	gent and fee are submitted for filing.		
Please return a	Il correspondence concerning this matter to	the following:		
Michael Wolfe (Name of Contact Person)				
	(Name of Contact	ct Person)		
	Manday Pro	nerties Inc		
Mandev Properties, Inc (Firm/Company)				
9810 Alt A1A Suite 105				
	(Addres	s)		
Palm Beach Gardens, FI 33410 (City/State and Zip Code)				
For further info	ormation concerning this matter, please call	•		
1 or rainer mile	simulation concerning into matter, pieuse cum	•		
	Kathy Boggess (Name of Contact Person)	at ( <u>561</u> ) <u>630-9995</u> (Area Code & Daytime Telephone Number)		
		(Trea code a Baytime Telephone (tumber)		
Enclosed is a \$	35.00 check made payable to the Departme	ent of State.		
	Mailing Address:  Amendment Section	Street Address: Amendment Section		
	Division of Corporations	Division of Corporations		
	P.O. Box 6327	Clifton Building		
	Tallahassee, FL 32314	2661 Executive Center Circle		
		Tallahassee, FL 32301		

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, ange is submitted for a corporation organized under the laws of the Ser to change its registered office or registered agent, or both, in the S	State of Florida
1. The name of	the corporation: Sub-Gard-East, Inc	
2. The principal	l office address: 425 Place Jacques Cartier, Suite 400	
Montreal C	Quebec H2Y3B1	
3. The mailing a	address (if different): 9810 Alt A1A Suite 105 Palm Beach	Gardens, Fl 33410
4. Date of incorp	poration/qualification: 11/03/1987 Document number:	M61925
	d street address of the current registered agent and registered office of artment of State: (If resigned, enter resigned)	on file with the
	CT Corporation System	
	1200 S. Pine Island Road	FILE ZOBI DEC 22 SECRETAR'S TALLAHASS
	Plantation, FI 33324	EC 23
6. The name and (if changed):		
	Michael Wolfe	gr. s
	9810 Alt A1A Suite 105 (P.O. Box NOT acceptable)	
	Palm Beach Gardens, FI 33410	
The street addr	ress of its registered office and the street address of the business of the bu	ffice of its registered agent,
	was authorized by resolution duly adopted by its board of directors the board, or the corporation has been notified in writing of the ch	s or by an officer so lange.
, •		ey Wolfe of hame and title)
I hereby accept I further agree of my duties, a document is be corporation ha	of the appointment as registered agent and agree to act in this cape to comply withline provisions of all statutes relative to the proper and I am familiar with and accept the obligation of my position as leing faled marely to reflect a change in the registered office address as been profiled in writing of this change.	acity. r and complete performance registered agent. Or, if this ss, I hereby confirm that the
(S	Signature of Registered Agent) (Da	ie)
If signing on b	pehalf of an entity:	
Micha	(Typed or Printed Name)	

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