## M84777

-	(Requestor's Name)	
	(Address)	
1	(Address)	
	(City/State/Zip/Phone #	)
PICK-UF	WAIT	MAIL
• ,	(Business Entity Name)	)
	(Document Number)	
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Special Instructions to Filing Officer:		
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## **COVER LETTER**

	Iment Section on of Corporations	
SUBJECT:	Interior Collections &	oration) By Kadi Inc.
DOCUMENT	NUMBER: M84777	
The enclosed S	statement of Change of Registered Office/A	gent and fee are submitted for filing.
Please return al	Il correspondence concerning this matter to	the following:
	Kadi Male	.Ki
	(Name of Contact	c rerson)
	Interior Collections (Firm/Comp	B Design by Kodi, Inc.
	917 1st Street (Address	Novin #701
	Jacksonville Ba	ach, Fr. 32250 Cip Code)
For further info	ormation concerning this matter, please call:	
Kadi	Malely (Name of Contact Person)	at (904) 254- 1309 (Area Code & Daytime Telephone Number)
Enclosed is a \$	35.00 check made payable to the Department	nt of State.
	Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

TO:

## 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 Florida in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: <u>Interior Collections</u> & <u>Design By Kadi</u> , <u>Inc.</u> 2. The principal office address: 917 Ist Street Norm #701
Jacksonnie Beach Fr. 32250
3. The mailing address (if different):
4. Date of incorporation/qualification: 6/9/1988 Document number: M84777
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
Ladi Malely P.S. &
12168 NW 9日 DV 整日
Coval Springs, Fr. 33071
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
<u>Kadi Maleia</u>
(P.O. Box NOT acceptable)
Jacksonnile Beach Fr. 32250
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.
Kadi Maleki Pyksident  (Printed or typed nameland 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.
Mr hr 2/76/08
(Signature of Registered Agent) (Dale)
If signing on behalf of an entity:
(Typed or Printed Name)

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