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SECRETARY OF STATE

## **COVER LETTER**

TO: Amendment Section Division of Corporations
SUBJECT: Remember It's For The Children (Name of Corporation)
DOCUMENT NUMBER: N 03 0000 10835
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:
(Name of Contact Person)
Renember It's For The Children (Firm/Company)
4701 H. Clarkershy Dr. (Address)
(City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Contact Person) at (954) 732 62 69 (Area Code & Daytime Telephone Number)
(Name of Contact Person) (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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## 1

## 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 in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: Remember It's For The Children, Inc.
2. The principal office address: 4701 N. University Drive  LAuderhill FL 33351
3. The mailing address (if different):
4. Date of incorporation/qualification: Dec. 29, 2003 Document number: NO300010835
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
Robert Klingerstein
4701 M. University De
_ LAnderhill FL33351 3 25
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):    Archange   Country
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.    Complete the complete or director of director of director of the corporation has been notified in writing of the change.    Complete the 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.    Complete the 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.    Complete the change of the change o
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MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (8/05)

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