N05000002281

7 reedor 2100 Oc Jax Beau		
(Cit	y/State/Zip/Phone	· #)
PICK-UP	☐ WAIT	MAIL
	siness Entity Nam	<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>
(50	sittess Chary Hair	<i>i</i> C _j
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
	Office Use Onl	y



400059725224

09/20/05--01021--010 **35.00

SEP 20 AM ... OC

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
1. The name of the corporation: FREEDOW CRUSADERS, INC.
2. The principal office address: 2100 OCEAN DE S ZC, JACKSONVILLE
BEACH, FL 32250
3. The mailing address (if different): SACCE
4. Date of incorporation/qualification: 3-7-05 Document number: NOS 00 000 Z28
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
DIETER G. ARNOUD
2100 OCEAN DRSZC
BACKSONVILLE BEACH, FL 32250
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
BASETTE LUC MAHON
2100 OCEAN DR S Z C. (P.O. Box NOT acceptable)
JACKSONVILLE BEACH, FL 32250 8
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.
Bubille Makon BABETTE Me MAHON (Printed or typed name and 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.
Cabette Mahan 9-15-05 (Signature of Registered Agent) (Date)
If signing on behalf of an entity:
(Typed or Printed Name)

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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