N05000005449

(Requestor's Name)							
(Address)							
(Address)							
(City/State/Zip/Phone #)							
(Orty/State/Zip/Phone #)							
PICK-UP WAIT MAIL							
(Business Entity Name)							
(Document Number)							
Certified Copies Certificates of Status							
Special Instructions to Filing Officer:							
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Office Use Only



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07/27/05--01012--013 **35.00



an 1-27

COVER LETTER

	ment Section n of Corporations							
SUBJECT: A	PLACE OF REFUGE ENTI	ERPRISES, INC. of corporation)						
DOCUMENT 1	NUMBER: N05000005449							
The enclosed St	atement of Change of Registered Of	ffice/Agent and fee are submitted for filing.						
Please return all	correspondence concerning this ma	atter to the following:						
	SUSAN BAIN							
(Name of contact person)								
-	A PLACE OF REFUGE E	ENTERPRISES, INC.						
	6600 S.W. 18th Stre	• •						
	(A	Address)						
	Miramar, Fl.33020							
** * * * * * *	` •	e and zip code)						
For further infor	mation concerning this matter, pleas	se call:						
SUSAN (BAIN Name of contact person)	at (954) 933-9515 (Area code & daytime telephone i	number)					
Enclosed is a \$3	5.00 check made payable to the Dep	partment of State.						
	Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399						

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

-	•	tions 607.0502, 617.0 for a corporation org			
in orde	r to change its re	gistered office or reg	istered agent, or b	oth, in the State o	of Florida.
1. The name of t	he corporation:_	A PLACE OF	REFUGE ENT	ERPRISES,	INC
2. The principal	office address:	6600 S.W.	18th Street	. Miramar,	F1. 33020
3. The mailing a	ddress (if differe	nt):			
4. Date of incorp	oration/qualifica	tion: 5/20/05	Documer	nt number: <u>NO5</u>	000005449
	street address of state:	f the current registere	d agent and registe	ered office on file	with the
	MAURICE	MOOTY Jr	<u>,</u>	····	
	803 N.W	. 2nd Avenue	2		os Ju
	Pompano	Beach, Fl.	33060		127
6. The name and (if changed):	street address of	the new registered a	gent (if changed) a	and /or registered	office FFG
	SUSAN B	AIN			_ = = =
		W.18th Stree			
	Miramar	(P.O. Box NOT accepts F1. 33020	able)		
The street addre	ss of its register be identical.	ed office and the stre	eet address of the	business office o	of its registered agent,
Such change wa	s authorized by	resolution duly ador corporation has been	oted by its board o	of directors or by	an officer so
- Milt	1 1 1 TO			_	
(Signatur	re of an officer or dire	ctor)	MILIO (Printed or typed name	VICE PRESIDENT
I hereby accept I further agree to of my duties, and document is being corporation has	the appointment to comply with the d I am familiar with the filed merely to been notified in	t as registered agent he provisions of all s with and accept the c o reflect a change in writing of this chan	and agree to act tatutes relative to obligation of my p the registered of ge.	in this capacity. the proper and ignition as registion as registifice address, I he	complete performance ered agent. Or, if this ereby confirm that the
Lug	on Bami		475- ************************************	7-21-05	•
(Signing on bel	nature of Registered A			(Dute)	
	IN BA	•			

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