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JAN 27 2014

R. WHITE

## **COVER LETTER**

TO: Amendment Section Division of Corporations KREWE D'ILE BLANCHE, INC N07000006099 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: CANDY ROWE Name of Contact Person Firm/Company 8475 BEULAH RD Address PENSACOLA, FL 32526 City/State and Zip Code candy@panhandle.rr.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: CANDY ROWE Name of Contact Person 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

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

statement of ch	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statu ange is submitted for a corporation organized under the laws of the State of FLOF er to change its registered office or registered agent, or both, in the State of Floria	RIDA	_	
	the corporation: KREWE D'ILE BLANCHE, INC			
The name of     The principal	office address: 8475 BEULAH RD, PENSACOLA, FL 32526		•	
2. The principal	office dedicess.			
3. The mailing	address (if different):		<del>.</del> .	
4. Date of incor	poration/qualification: 6/19/2007 Document number: N0700000	)6099		
	d street address of the current registered agent and registered office on file with th rtment of State: (If resigned, enter resigned)	ie		
	MELISSA S WILMER			
	305 INTERBAY AVE			
	PENSACOLA, FL 32507	É	7,	
6. The name an (if changed):	d street address of the new registered agent (if changed) and /or registered office		那 21	· · · · · · · · · · · · · · · · · · ·
	CANDY ROWE	ر جندان المارية المارية		
	8475 BEULAH RD			
	P.O Box NOT acceptable PENSACOLA, FL 32526	Fan	94	
	ess of its registered office and the street address of the business office of its reg l be identical.  as authorized by resolution duly adopted by its board of directors or by an office he board, or the corporation has been notified in writing of the change.		gent,	
Makon	Real MALLOM REID VICE PRES.  The of an officer or director Printed or typed name and title	ZO.EN.T		
I hereby accep I further agree performance o agent. Or, if thereby confirm	t the appointment as registered agent and agree to act in this capacity. to comply with the provisions of all statutes relative to the proper and complete f my duties, and I am familiar with and accept the obligation of my position as r his document is being filed merely to reflect a change in the registered office add that the corporation has been notified in writing of this change.	e egistered dress, I	d	
Carly	spature of Registered Agent 1-10-14			
If signing on be	ehalf of an entity:			
	Typed or Printed Name			
	* * * FILING FEE: \$35.00 * * *			

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (03/12)