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## **COVER LETTER**

то:	Amendment Section Division of Corporations		
SUBJ Name	ECT: Catherine From Com	nurshy havelegial-ut (cun kite)	
DOCI	UMENT NUMBER: <u>N 090000</u>	02309	
		Office/Agent and fee are submitted for filing.	
	return all correspondence concerning this		
Name	Jean R Metellys		
	Company		
Addre	Of Kings Bridge Street		
City/S	130ca Rector Fl 33467 state and Zip Code	<del></del>	
E-ma	<u>Tean He hellus 2ee</u> il address: (to be used for future annual	report/notification)	
For fu	irther information concerning this matter, p	blease call:	
<u>Al</u>	Name of Contact Person	at (56) 305-8737 2	
Enclo	sed is a \$35.00 check made payable to the		
	Mailing Address: Amendment Section	Street Address: Amendment Section	
	Division of Corporations	Division of Corporations $\frac{1}{12}$	
	P.O. Box 6327	The Centre of Tallahassee 431 65 2415 N. Monroe Street, Suite 810	
	Tallahassee, FL 32314	Tallahassee, FL 32303	

CR2E045 (04/13)

## 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 <u>FLORIDA</u> in order to change its registered office or registered agent, or both, in the State of Florida. 1. The name of the corporation: Catherine FLON Commy nity Developinent 2. The principal office address: 3572 Lartana Rd Lake worth P 3. The mailing address (if different): \_ 4. Date of incorporation/qualification: 03-06-2009 Document number: N 0900002309 5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned) RATON FL 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): The street address of its registered office and the street address of the business office of its register 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. I hereby accept the appointment as registered agent and agree to act in this capacity.

I jurther 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. Signature of Registered Agent If signing on behalf 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 (04/13)