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## **COVER LETTER**

TO:	Amendment Section Division of Corporations
SUBJE	CT: Friends Of Mount Elizabeth, Inc. Name of Corporation
DOCU	MENT NUMBER: N9600006090
The en	closed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please	return all correspondence concerning this matter to the following:
	Colleen J. Holmes
	Name of Contact Person
	Friends Of Mount Elizabeth, Inc.
	Firm/Company
	681 N.E. Zebrina Senda
	Address
	Jensen Beach, Fl 34957  City/State and Zip Code
	City/State and Zip Code
	cholmes@martin.fl.us
	E-mail address: (to be used for future annual report notification)
For fur	ther information concerning this matter, please call:
	Colleen Holmes at ( 772 ) 288-5794
	Name of Contact Person Area Code & Daytime Telephone Number
Enclose	ed is a \$35.00 check made payable to the Department of State.
	Mailing Address:  Amendment Section  Street Address:  Amendment Section
	Division of Corporations  P.O. Box 6327  Division of Corporations  Clifton Building
	P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle

Taliahassee, FL 32301

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

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