N9900007167

(Req	uestor's Name)	<u> </u>
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Certified Copies	Certificates	of Status
Special Instructions to F	iling Officer:	
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COVER LETTER

TO: Amendment Section Division of Corporations

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SUBJECT: NA (NGADD of NE fissel Coursel on A/ who/ism + Kheng Dependence of Name of Corporation & Wapth F/on is a

DOCUMENT NUMBER: N9900007167

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:

of NFL irm/Company 2566 City/State and Zip C 8738 ORTEGA PARK DR NAVARRE FL 32566-4139 E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

 $\frac{1}{4} \operatorname{at} \left(\frac{850}{250} \right) \frac{939}{939} - \frac{4999}{29}$ ORVA HA

Enclosed is a \$35.00 check made payable to the Department of State.

<u>Mailing Address:</u> 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

CR2E045 (8/05)

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

1. The name of the corporation: NHONEP Coursilow Al who kin AND Duy Oppondue 3-Floridan 2. The principal office address: 8738 Okteg A Bak Dr Norther R 32566 Inc
3. The mailing address (if different): 339 RACETRACK Rd #7 FWB, FC 32547
4. Date of incorporation/qualification: Dec/999 Document number: N9900007/67
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) Leo Downelly 339 RACE TARK M H7 EWB, FL 32547
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): <u>DANIEL HONVAHA</u> <u>8738 ORtegA PAMI AR</u> <u>PO. Box NOT acceptable</u> <u>NAVATTE</u> <u>R</u> <u>S2566</u>

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.

ignature of an officer or director

rinted 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.

Signature of Neglstered

If signing on behalf of an entity:

* * * 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 (8/05)