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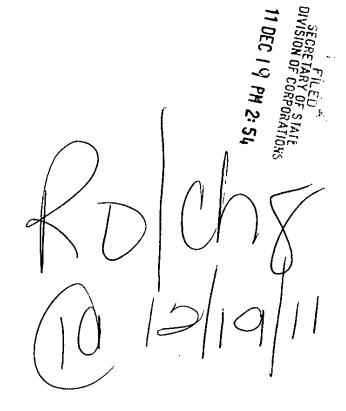
(Re	questor's Name)			
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то:	Amendment Section Division of Corporat	ions			
SUBJ	ECT:	CBG ENTERPR		·	
		Name of Co	orporation		
DOC	JMENT NUMBER:_	P000	00018788		
The en	closed Statement of Ci	hange of Registered Office	/Agent and fee are submi	tted for filing.	
		nce concerning this matter	_	-	
		CHRIS G	ROVES		
	- 11 - 2 - 3 -	Name of Con	tact Person		
		CBG ENTERP	RISES, INC.		
		Firm/Co	mpany		
		•		,	
		1913 CHESTN	UTWOOD DR		
		Addr			
		VALRICO,	FL 33596		
City/State and Zip Code					
	E mail a	GROVESHOUSE@ ddress: (to be used for fu	VERIZON.NET	Faction	
	E-man a	duress. (to be used for in	nure amuai report nom	neation)	
For fur	ther information conce	erning this matter, please ca	all:		
	CHRIS G	ROVES	at (813)	9950279	
	Name of Cont		Area Code & Dayti	me Telephone Number	
				-	
Enclos	ed is a \$35.00 check m	ade payable to the Departr	ment of State.		
			•		
•	<u>Mail</u>	ing Address:	Street Address		
	Ame	endment Section	Amendment So	ection	
		sion of Corporations	Division of Co		
		Box 6327	Clifton Buildin		
	Talla	ahassee, FL 32314		e Center Circle	
			Tallahassee, F	L 32301	



FLORIDA DEPARTMENT OF STATE Division of Corporations

December 6, 2011

CHRIS GROVES CBG ENTERPRISES, INC. 1913 CHESTNUTWOOD DR. VALRICO, FL 33596

SUBJECT: CBG ENTERPRISES, INC.

Ref. Number: P00000018788

We have received your document for CBG ENTERPRISES, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must have original signatures.

PHOTO COPIES ARE NOT ACCEPTABLE.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6964.

Irene Albritton Regulatory Specialist II

Letter Number: 711A00027258

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11 DEC 19 AM 8: 44
ALLANASSER ELORDA

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 Statutes, this ange is submitted for a corporation organized under the laws of the State of FLORIDA er to change its registered office or registered agent, or both, in the State of Florida.
1. The name of	the corporation: CBG ENTERPRISES, INC
	office address: 1913 CHESTNUTWOOD DR. O, FL 33596
3. The mailing	address (if different):
4. Date of incor	poration/qualification: 02/18/2000 Document number: P00000018788
	d street address of the current registered agent and registered office on file with the rtment of State: (If resigned, enter resigned)
	CHRIS GROVES
	9455 WELLSTONE DR
	LAND O LAKES, FL 34638
6. The name an (if changed):	LAND O LAKES, FL 34638 d street address of the new registered agent (if changed) and /or registered office CHRIS GROVES 1913 CHESTNUTWOOD DR P O Box NOT acceptable
	CHRIS GROVES
	1913 CHESTNUTWOOD DR PO Box NOT acceptable
	VALRICO, FL 33596
The street addr as changed wil	ess of its registered office and the street address of the business office of its registered agent, I be identical.
Such change wanthorized by t	as authorized by resolution duly adopted by its board of directors or by an officer so he board or the corporation has been notified in writing of the change.
/ Signatu	CHRIS GROVES, PRESIDENT Printed or typed name and title
I hereby accept I further agree of my duties, an document is be corporation ha	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 performance and I am familiar with and accept the obligation of my position as registered agent. Or, if this ing filed merely to reflect a change in the registered office address, I hereby confirm that the s been notified in writing of this change.
Mur	11/21/2011
	gnature of Registered Agent Date
ii signing on be	chalf of an entity:
Т	'yped 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 (8/05)