

P00000024866

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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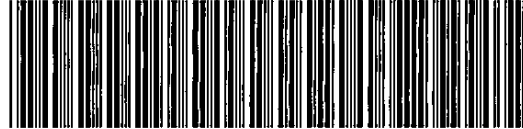
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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600080904456

*NO change
Fees*

11/20/06--01056--014 **35.00

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: ALPHITO (FLORIDA) INC.
(Name of Corporation)

DOCUMENT NUMBER: P00000024866

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:

Lawrence Swan
(Name of Contact Person)

Caloosehatche Tax & Financial Services Inc
(Firm/Company)

709 Cape Coral Parkway West
(Address)

Cape Coral Florida 33914
(City/State and Zip Code)

For further information concerning this matter, please call:

Lawrence Swan at (239) 540-2612
(Name of Contact Person) (Area Code & Daytime Telephone Number)

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**

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 Florida
in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: ALPHITO (FLORIDA) INC.
2. The principal office address: 3916 SE 18TH PLACE
CAPE CORAL FL 33904 US
3. The mailing address (if different): 709 Cape Coral Parkway West, Cape Coral Fl 33914
4. Date of incorporation/qualification: 03/10/2000 Document number: P00000024866
5. The name and street address of the current registered agent and registered office on file with the
Florida Department of State:

Lawrence Swan

1749 NE 7th Terrace, Ste. 4

Cape Coral Fl 33909

6. The name and street address of the new registered agent (if changed) and /or registered office
(if changed):

Lawrence Swan

709 Cape Coral Parkway West

(P.O. Box NOT acceptable)

Cape Coral Fl. 33914

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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.

Rudolf Marx
(Signature of an officer or director)

Rudolf Marx
(Printed 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.

Lawrence Swan
(Signature of Registered Agent)

11-16-06
(Date)

If signing on behalf of an entity:

Lawrence Swan
(Typed or Printed Name)

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