P000000030801

(Re	equestor's Name)	
(Ac	ddress)	
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(Ci	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL .
(Ві	usiness Entity Nar	me)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
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SECRETARY OF STATEMS
DIVISION OF CORPORATIONS
ON OCT 22 PM 3: 07

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(1) 23,07

COVER LETTER

Division of Corporations	,
SUBJECT: Greeneyes, Inc.	
(Name of C	orporation)
DOCUMENT NUMBER: P00000036861	
The enclosed Statement of Change of Registered Office	e/Agent and fee are submitted for filing.
Please return all correspondence concerning this matter	to the following:
The second secon	to the following.
Richard J Potash	
(Name of Cor	ntact Person)
Richard J Potash PA	
(Firm/Co	ompany)
400 1111 400 1	
133 NW 100 Ave. (Addi	Page)
(Audi	(655)
Plantation ,Fl. 33324	
(City/State an	d Zip Code)
For further information concerning this matter, please c	all:
Richard J Potash	
(Name of Contact Person)	at (305) 651-0075 (Area Code & Daytime Telephone Number)
	, , ,
Enclosed is a \$35.00 check made payable to the Depart	ment of State.
Mailing Address: Amendment Section	Street Address:
	Amendment Section Division of Corporations
Division of Corporations P.O. Box 6327	Division of Corporations Clifton Building
Tallahassee, FL 32314	2661 Executive Center Circle
rananassee, r L 32314	Tallahassee, FL 32301
	Tallahassee, FL 32301

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

statement of chair	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this nge is submitted for a corporation organized under the laws of the State of Florida
in order	r to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the	he corporation: Greeneyes, Inc.
2. The principal	office address: 300 NW 82 Ave Suite 415 Plantation , FI 33324
3. The mailing ac	ddress (if different):
4. Date of incorp	poration/qualification: 04/07/2000 Document number: P00000036861
	street address of the current registered agent and registered office on file with the tment of State:
	Richard J Potash PA
	300 NW 82 Ave Suite 415
	Plantation, Fl. 33324
6. The name and (if changed):	300 NW 82 Ave Suite 415 Plantation, Fl. 33324 street address of the new registered agent (if changed) and /or registered office Richard J Potash PA
,	Richard J Potash PA
	133 NW 100 Åve.
•	(P.O Box NOT acceptable)
ć	Plantation ,Fl. 33324
The street address as changed will	ss of its registered office and the street address of the business office of its registered agent, be identical.
Such change was authorized by the	s authorized by resolution duly adopted by its board of directors or by an officer so e board, or the corporation has been notified in writing of the change.
(Signatur	Salomon Mishaan, Director (Printed or typed name and title)
I hereby accept to I further agree to of my duties, and document is being	the appointment of registered agent and agree to act in this capacity. o comply with the provisions of all statutes relative to the proper and complete performance d I am familiar with and accept the obligation of my position as registered agent. Or, if this ag filed merely to reflect a change in the registered office address, I hereby confirm that the been notified in writing of this change.
_(Cichano	1 TROHASK . 10/19/07
(Sigi	nature of Registered Agent) (Date)
If signing on beh	nalf of an entity:
Richard J Pota	gsh yped or Printed Name)
('')	\L==

Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

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