## P00000041227

(Requestor's Name)			
• (Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Consideration Name)			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			





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## **COVER LETTER**

	ment Section in of Corporations	
subject: H	&M ENTERPRISES OF S. W. F. (Name of Co	LORIDA, INC.
DOCUMENT	NUMBER: P00000041227	
The enclosed S	tatement of Change of Registered Office	Agent and fee are submitted for filing.
Please return al	l correspondence concerning this matter	to the following:
	HEIKE BUSBY (Name of Cont	act Person)
	ALLURE ACCOUNTING, LLC (Firm/Cor	npany)
	3665 BONITA BEACH ROAD, S (Addre	
	BONITA SPRINGS, FL 34134	
	(City/State and	l Zip Code)
For further info	ormation concerning this matter, please ca	all:
MARENA LOE	(Name of Contact Person)	at ( 239 ) 992-3355 (Area Code & Daytime Telephone Number)
Enclosed is a \$	35.00 check made payable to the Departr	nent 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.		
The name of the corporation: H&M ENTERPRISES OF S. W. FLORIDA, INC.		
2. The principal office address: 2170 ARIELLE DR. 709, NAPLES, FL 34109		
3. The mailing address (if different): 3665 BONITA BEACH ROAD, STE. 3, BONITA SPRINGS, FL 34134		
4. Date of incorporation/qualification: 04/21/2000 Document number: P00000041227		
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:		
MAGDALENE BIRK		
2170 ARIELLE DR. 709		
NAPLES, FL 34109.		
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):		
HANS BIRK		
2170 ARIELLE DR. 709  (P.O. Box NOT acceptable)		
NAPLES, FL 34109.		
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.		
(Spinature of an officer or director)  MAGDALENE BIRK (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.		
(Signature (Registered Agent) (Date)		
If signing on behalf of an entity:		
(Typed or Printed Name)  * * * FILING FEE: \$35.00 * * *		