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(Re	questor's Name)	
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(Cit	y/State/Zip/Phone	e #)
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R.A. Change

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FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

January 20, 2005

THOMAS PIATKOWSKI 4917 S.W. 13T AVE. CAPE CORAL, FL 33914

SUBJECT: DOLLARLAND USA INC.

Ref. Number: P00000042713

We have received your document for DOLLARLAND USA INC.. However, the document has not been filed and is being returned for the following:

The fee to file your document is \$35.

If you have any questions concerning this matter, please either respond in writing or call (850) 245-6869.

Letter Number: 705A00003746

Teresa Brown Document Specialist

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
1. The name of the corporation: DOLLARLAND UGH JUC.
2. The principal office address: 4917 91 w 13th Auc
CAPE COPAL FL 33914
3. The mailing address (if different):
700000 117713
4. Date of incorporation/qualification: 4-21-2000 Document number: P000000 427/3
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
THOMAS PLATKOWSKI
4917 9. W 13th AND
CAPO CORAL FL 33914
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
DAVID My LVOIDAV/
25711 TNLATEDAY COUNT
BONNA GINNA FL 34175
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.
(Signature of an officer or director) (Signature of an officer or director) (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 ghange in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.
Della Faller 1/2/04
(Signature of Registered Agent) (Date)
If signing on behalf of an entity:
(Typed or Printed Name)

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