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(Requestor's Nam	ne)
Dorothy A. Hud chartered attorney at Lai 2903 Cardinal di vero beach, florida	W RIVE
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## 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
Flonda in order to change its registered office or registered agent, or both, in the State
of Florida.
1. The name of the corporation: Culmary Capers, Inc.
2. The principal office address: 980 Oyster Shell lane,
Vero Beach, FL 32963
3. The mailing address (if different): Same
4. Date of incorporation/qualification: 05-15-00 Document nu
5. The name and street address of the current registered agent and registered Florida Department of State:
Anne T. Devanney
GOO Touris Davido
109 Tropic Drive
Vero Beach, FC 32963
6. The name and street address of the new registered agent (if changed) and /or registered office (if
changed): Curt A. Lienemann
980 Oyster Shell lane (P.O. Box or personal mailbox NOT acceptable)
Vero Beach, FL 32963
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.
Wand to Judian Daniel E. Graham, President (Signature of an officer, chairman or vice chairman of the board)
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.
Curl Canada (Signature of Registered Agent) (Date)
If signing on behalf of an entity:
(Typed or Printed Name) (Capacity)
* * * FILING FEE: \$35.00 * * *
Make checks payable to Florida Department of State and Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314