## Paccos 57565

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ASP 109

## **COVER LETTER**

Amendment Section Division of Corporations

SUBJECT: E&W AFFORDABLE SIGNS, INC.								
	Name of C	Corporation						
DOCUMENT NUMBER	t:P00	000057565						
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:								
WENDEL CARPENTER								
Name of Contact Person								
E&W AFFORDABLE SIGNS, INC.								
Firm/Company								
COOR O. ORANIOF AVE								
6028 S. ORANGE AVE. Address								
	ORLANDO	). FL 32809						
ORLANDO, FL 32809 City/State and Zip Code								
# FUCTORS @ CIGI OF CHAR								
E-mail address: (to be used for future annual report notification)								
For further information concerning this matter, please call:								
· · · · · · · · · · · · · · · · · · ·								
	CARPENTER	at (407) 438-4874 Area Code & Daytime Telephone Number						
Name of Contact Person Area Code & Daytime Telephone Number								
Enclosed is a \$35.00 check made payable to the Department of State.								
	/ailing Address:	Street Address:						
_	Amendment Section	Amendment Section						
	Division of Corporations	Division of Corporations						
	P.O. Box 6327	Clifton Building						
I	Callahassee, FL 32314	2661 Executive Center Circle						

Tallahassee, FL 32301

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

statement of ch	ange is submitted f	or a cor	poration organized	07.1508, or 617.1508, Flo I under the laws of the Sta I agent, or both, in the Sta	te of Florida		
1. The name of	the corporation: E	&W /	FFORDABL	E SIGNS, INC. E., ORLANDO, FL 32			
2. The principal	office address.			.,, _,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
3. The mailing	address (if differen	ıt):					
4. Date of incorporation/qualification:		6-14-2000	Document number:	P00000057565			
	d street address of rtment of State: (If			t and registered office on	file with the		
	RESIGNED	Tukd	arian & Uncap	her, P.A.			
228 Hillcrest St.							
	Orlando, FL 32801						
6. The name an (if changed):	d street address of			f changed) and /or register	red office Services		
6028 S. ORANGE AVE.							
	0020 0. 0		P.O. Box NOT acc	ceptable	<del> </del>		
	ORLANDO, F	L 328	09				
The street addr as changed wil	ess of its registere	d office	e and the street add	dress of the business office	ce of its registered agent,		
//	as authorized by the board, or the c	o F	on duly adopted by or has been notifi	y its board of directors or ed in writing of the chan WENDEL CARPEN Printed or typed nai	ITER, DIRECTOR		
I hereby accep I further agree of my duties, a	t the appointment	as regis e provis vith and o reflect	sions of all statute:   accept the obliga   a change in the re	oree to act in this canaci	ity. nd complete performance gistered agent. Or, if this I hereby confirm that the		
- As	gnature of Registered Ag	gent	<del>/</del>	Date			
If signing on b	ehalf of an entity:						
Wendel	Carpente Typed or Printed Name						

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