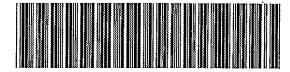
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## TRANSMITTAL LETTER

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Division of Corporations
SUBJECT: Florida Lifts Inc. (Name of corporation)
DOCUMENT NUMBER: P0000060619
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:
Jennifer Kearney (Name of person)
FLORIDA LIFTS, Inc. (Name of firm/company)
9737 NW 415T St # 173 (Address)
Miawi (City/state and zip code)
For further information concerning this matter, please call:
Name of person) at (305) 872 4802 (Area code & daytime telephone number)
England is a \$25.00 shoot made namble to the Department of State

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

TO:

Amendment Section

Street Address: Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399

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

Pursuant to the	e provisions of sections 607.0502, 617.0502, 607.1508, or 617.	1508, Florida Statutes,
thjs statement of	f change is submitted for a corporation organized under the laws	of the State of
Florida	in order to change its registered office or registered age	nt, or both, in the State
of Florida.	all Cht.	S g
1. The name of	the corporation: Florida Litts, Inc.	<del></del>
2. The principal	office address: 9737 NW 415T Street, #	173 85 0
Mianu	KL 33178	me R
3. The mailing a	address (if different):	575
_		On -
4. Date of incor	poration/qualification: ( 19/200 Document number	::P000000606)
	d street address of the current registered agent and registered officertment of State:	ce on file with the
	Robert Rinearson	
	285 Goifview Drive	<del></del>
	Townesty F1 33469	<del></del>
6. The name ar	and street address of the new registered agent (if changed) and	/or registered office (if
changed):	Jennifer Klarnen	·
•	9737 NIN 419 St # 173	
	MIAWI (4 33178)	
The street addreagent, as change	ess of its registered office and the street address of the business ed will be identical.	office of its registered
	as authorized by resolution duly adopted by its board of director he board, or the corporation has been notified in writing of the co	
	r, chairman of vice chairman of the board) (Printed or typed name as	
performance of registered agen office address,	t the appointment as registered agent and agree to act in this ca to comply with the provisions of all statutes relative to the prop my duties, and I am familiar with and accept the obligation of it. Or, if this document is being filed merely to reflect a change I hereby confirm that the corporation has been notified in writi	my position as in the registered
If signing on behal		<u> </u>
(Ī	Typed or Printed Name) (Capacity)	

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