

PODDDDDD-77182

(Requestor's Name) _____

(Address)

(Address)

(City/State/Zip/Phone #)

☐ MAIL

(Business Entity Name)

(Document Number)

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: happy accents inc.
Name of Corporation

DOCUMENT NUMBER: p00000077182

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:

peter martin

Name of Contact Person

happy happy accents inc.

Firm/Company

2232 coltsview lane

Address

matthews n.c. 28105

City/State and Zip Code

happyaccents2054@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

peter martin

Name of Contact Person

at (954) 8069687

Area Code & Daytime Telephone Number

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

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.

1. The name of the corporation: happy accents inc.
2. The principal office address: 2900 w. sample rd
pompano beach fl 33073
3. The mailing address (if different): 2232 coltsview lane
matthews n.c. 28105
4. Date of incorporation/qualification: 08/09/2000 Document number: p00000077182
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)
dianne mcmurray
6483 amberwoods
boca raton fl 33433
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
dale weiner
1502 cayman way apt. a2
P.O. Box NOT acceptable
coconut creek 33066

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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.

Kathleen Schettini
Signature of an officer or director

kathleen schettini
Printed or typed name and title President

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.

X Dale Weiner
Signature of Registered Agent

X OCT. 6, 2014
Date

If signing on behalf of an entity:

Dale Weiner
Typed or Printed Name

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