## P000000940

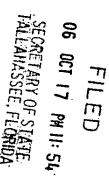
(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
,
(Business Entity Name)
(======, ====,
(Document Number)
Certified Copies Certificates of Status
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Consideration to Effect Office
Special Instructions to Filing Officer:

Office Use Only



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KHA RACHUNGO

## **COVER LETTER**

TO: Amendment Section Division of Corporations
SUBJECT: Executive Sales Company, Inc, (Name of Corporation)
DOCUMENT NUMBER:
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:
Name of Contact Person)  Exercising Seles Company Local
Executive Sales Company, Inc. (Firm/Company)
6053 NW 45+h Ave (Address)
Coconst Creck FL 33073 (City/State and Zip Code)
For further information concerning this matter, please call:
Name of Contact Person) at (5(01) 241 - 7199  (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 in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: Executive Sales Company Inc
2. The principal office address: 6053 N w 45th Ave.
COCONUT CINK, FL 33073
3. The mailing address (if different):
4. Date of incorporation/qualification: October 12, 2000 Document number:
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
Adele Rockey
- Adele Rockey - Co561 Via Ragina
Brun Raton FL 33433
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Drew Ench
(P.O. Box NOT acceptable)
(OWNIT Creck, FL 33073 FF = 1
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 office authorized by the board, or the corporation has been notified in writing of the change.
(Signature of an officer or director)  Orew Enich (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 change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.
10-13-2006
(Signature of Registered Agent) (Date)  If signing on behalf of an entity:
n signing on ochan or an entity.
(Typed or Printed Name)

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (8/05)

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