

P00000112636

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800260216778

05/19/14--01016--015 **35.00

2014 MAY 19 P 1:45
FILED
SECOND FLOOR STATE
TALLAHASSEE, FLORIDA

RD

JUN 03 2015
T. LEMIEUX

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: DORIAN ENTAN HOLDINGS, INC
Name of Corporation

DOCUMENT NUMBER: P00000112636

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:

R. LUENN MARTIN
Name of Contact Person

DORIAN ENTAN HOLDINGS
Firm/Company

PO BOX 822891
Address

PEMBROKE PINES, FLORIDA 33082
City/State and Zip Code

RGEM@ATTI.NET
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

R. LUENN MARTIN at (954) 605 7389
Name of Contact Person 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: DORIAN ENTAN HOLDINGS INC
2. The principal office address: 16366 NW 13 ST PEMBROKE PINES FLA 33028
3. The mailing address (if different): POBOX 822891 PEMBROKE PINES FLA 33082
4. Date of incorporation/qualification: 12/08/2000 Document number: P00000112636
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)

DONNIA M DELGADO ESQUIRE
1031 IVES DAIRY ROAD #228
MIAMI FLORIDA 33179

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

DONNIA M. DELGADO ESQUIRE
19 WEST FLAQUER STREET #406
P.O. Box NOT acceptable
MIAMI FLORIDA 33130

FILED
2014 MAY 19 P 1:4
TALLAHASSEE FLORIDA

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.

[Signature]
Signature of an officer or director

May 15 2014
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.

[Signature]
Signature of Registered Agent

May 8 2014
Date

If signing on behalf of an entity:

Typed or Printed Name

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