## P01000021137

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SECRETARY OF STATE
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R-A Charge

Constitute APR 1 1 2007

## **COVER LETTER**

TO: Amendment Section Division of Corporations
SUBJECT: All IN Clusium Accounting INC. (Name of Corporation)
DOCUMENT NUMBER: \$ 010000 21137
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)
All Inclusive Accounting INC. (Firm/Company)
15201 Roosevelt Bud Suite 101 (Address)
Close custor, Fl 33760 (City/State and Zip Code)
For further information concerning this matter, please call:
Charles GENTY at (7d) 535-5907 (Area Code & Daytime Telephone Number)
Enclosed is a \$35.00 check made payable to the Department of State.
Mailing Address: Amendment Section  Street Address: Amendment Section

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

**Division of Corporations** 

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

## 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: All Inclusive Accounting the	_
2. The principal office address: 1520   Rossavel + Blud Suife/of	_
Clearwater, P 33760  3. The mailing address (if different):	_ _
4. Date of incorporation/qualification: 2/27/200/ Document number: POI 0000 3 //3	- 7
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:	<u>^</u>
Teresa L GENTY	
1855 Brentwood Dr. For 0	
Clearuator, Pl 33764	
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):  Charles Genty  15601 Roosevelt Blad Surfelol  (P.O. Box NOT acceptable)	FILED
Clearnater, Fl 33)60	
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 of an officer or director)  (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.	
4/4/07	
(Signature of Registered Agent) (Date)  If signing on behalf of 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 \* \* \*