## 1000048174

	(Requestor's Name)	the state of the s
	(Address)	
1	(Address)	
	(City/State/Zip/Phone #)	
PICK-UP	WAIT	MAIL
-	(Business Entity Name)	<u></u>
1	(Document Number)	
Certified Coples	Certificates of S	Status
Special Instructions	to Filing Officer.	

Office Use Only



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## **COVER LETTER**

TO: Amendment Section Division of Corporations
SUBJECT: Charty Land Corporation (Name of Corporation)
DOCUMENT NUMBER: <u>PO1000048174</u>
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:
ROS SOM (Name of Contact Person)
Atlantic RV & Auto Service inc
403 N. Oceanshore Blvd
Flagler Beach, FL. 32136 (City/State and Zip Code)
For further information concerning this matter, please call:
ROS Som at (386) 439-5006 (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

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

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