P01000048789

(Re	equestor's Name)	
i (Ad	ddress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bı	ısiness Entity Nan	ne)
(Do	ocument Number)	, <u>21.212.12</u>
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



100009697161

01/06/03--01023--008 **185.00

FILED

03 JAN -6 PM 12: 03

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PRAIRO Chang (18/0)

TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: ALDEN GROUP, INC. (Name of corporation)
DOCUMENT NUMBER: P010000 48 78 9
The enclosed Statement of Change of Registered Office/Agent and fec are submitted for filing
Please return all correspondence concerning this matter to the following:
CRAIG MITCHEL L (Name of person)
(Name of person)
ALDEN GROUP INC (Name of furn/company)
9526 N. W. 52 nd PLACE (Address)
CORAL SPRINGS FL 33076
(City/state and zip code)
For further information concerning this matter, please call:
CRAIG MITCHELL at (951) 796-6722 (Name of person) (Area code & daytime telephone number)
(Name of 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 409 E. Gaines Street Tallahassee, FL 32399

CR2E045(07/02)

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, ar 617.1508, Florida Statutes. His statement of change is submitted for a corporation organized under the laws of the State of	
FLORIDE in order to change its registered office or registered agent, or both, in the State of Florida. 1. The name of the corporation: ALDEN GROUP, INC.	-
2. The principal office address: 9526 N.W. 52** PLACE CORA: Springs FL 33076	
3. The mailing address (if different):	
4. Date of incorporation/qualification: 11/5/2000 Document number: P010000 4878 9	
7. The name and street address of the current registered agent and registered office on file with the Florida Department of State:	
ALLAN HOEKSTRA	
4460 N.W. 630 DR.	
COCONUT CREEK FL 33073	
5. The name and street address of the new registered agent (if changed) and for registered office Af	
changed): CRAIS MITCHELL PRESE	
9524 N.W. 52nd PLACE	-
(P.O. dux or personal mailbox NOT acceptable)	•
The street address of its registered office and the street address of the business office of its registered office and the street address of the business office of its registered.	
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.	
Surratife of an online, charles or vice francis of the board) (1900 of typed name and this)	
hereby accept the appointment as registered agent and agree to act in this capacity further agree to comply with the provisions of all statutes relative to the proper and complete performancel of my dulies, and I am familiar with and accept the obligation of my position as egistered again! Or, if his document is being filed merely to reflect a change in the registered iffice address, thereby confirm that the corporation has been notified in writing of this change.	
Y 12-30-02	
(Date) Reigning on behalf of an entity:	
(Typed or Printed Name) (Cupacity)	

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

Make chicks payable to Florida Department of State and Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, Fl 32314