## POICOOS L 5 GIO

Alliance Cleaning Company P.O. Box 221203 Hollywood, FL 33022

RAChange

100004641531--0 -10/18/01--01037--002 \*\*\*\*\*35.00 \*\*\*\*\*\*35.00

10/18/01

## 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, the	
undersigned corporation organized under the laws of the State of <u>Florida</u>	
submits the following statement in order to change its registered office or registered agent, or both, in the	
State of Florida.  1. The name of the corporation: Alliance Cleaning Company	
1. The name of the corporation: ///////CE C/EGM/199 COMPANY	
2. The mailing address of the corporation: $P-O$ $Box$	
Hollywood \$2 33022	
3. Date of incorporation/qualification: <u>Sept. 6, 2001</u> Document number: <u>P0100086</u> 5	72
4. The name and address of the current registered agent and registered office:	
Martha Gallard	
2443 Cleveland ST.	. د
Hollywood, FL 33020 3	
5. The name and address of the new registered agent (if changed) and /or registered office (if changed):	
Adrian Gallard	
14850 WOST DIXIE HWY #GHS 20	
North Miam, FL 33181 500	
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.	
(Signature of an officer, chairman or vice chairman of the board) (Date)	
VP	
(Printed or typed name and title)	
Having been named as registered agent and to accept service of process for the above stated	
corporation, 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	
performance of my duties, and Lam familiar with and accept the obligation of my position as registered agent.	
XIII College - Interior	
(Signature of Registered Agent) (Date)	
If signing on behalf of an entity:	
(Typed or Printed Name) (Capacity)	-
* * * FILING FEE: \$35.00 * * *	
CR2E045(8799)	
UNICOPI(6/77)	

P.O. Box 6327

**DIVISION OF CORPORATIONS** 

TALLAHASSEE, FL. 32314