

PO1000106193

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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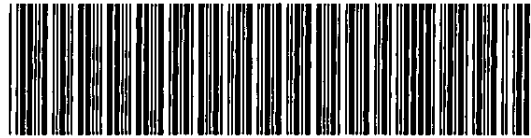
(Business Entity Name)

(Document Number)

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2007 APR -3 PM 3:50

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

APR  
4407

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Esprit de Vie, Inc  
(Name of Corporation)

**DOCUMENT NUMBER:** P01000106193

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:

Karole Davis  
(Name of Contact Person)

Esprit de Vie, Inc  
(Firm/Company)

5820 Yahl Street #5  
(Address)

Naples FL 34109  
(City/State and Zip Code)

For further information concerning this matter, please call:

Karole Davis at (239) 290-4473  
(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.

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

1. The name of the corporation: Esprit de Vie, Inc
2. The principal office address: 5820 Yahl Street #5  
Naples, FL 34109
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 10/30/01 Document number: P01000106193
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

Karole Cahill  
20810 Country Creek Dr #421  
Estero, FL 33928

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

Karole Davis  
5820 Yahl Street #5  
(P.O. Box NOT acceptable)  
Naples FL 34109

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.

Karole Davis  
(Signature of an officer or director)

Karole Davis, President  
(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.*

Karole Davis  
(Signature of Registered Agent)

3/29/07  
(Date)

If signing on behalf of an entity:

\_\_\_\_\_  
(Typed or Printed Name)

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE  
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314