P01000118729

(Requestor's Name)						
(Address)						
(Address)						
(Oile (Obele 17) a TOL our + ID						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
-						
(Document Number)						
•						
Certified Copies Certificates of Status						
Special Instructions to Filing Officer:						

Office Use Only



10/01/03--01030--002 **35.00



tring.

TRANSMITTAL LETTER

ŤO:	Amendment Section Division of Corporations
SUBJ	ECT: Dogleg Right, Inc.
	(Name of corporation)
DOC	UMENT NUMBER: P01000118729
The e	nclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please	e return all correspondence concerning this matter to the following:
Stev	en C. Elkin, Esq.
	(Name of person)
Franl	k, Weinberg & Black, P.L.
	(Name of firm/company)
7805	S.W. 6th Court
	(Address)
Plant	ation, FL 33324
	(City/state and zip code)
For fu	erther information concerning this matter, please call:
Steve	n C. Elkin at (954) 474-8000 (Name of person) (Area code & daytime telephone number)
	(Name of person) (Area code & daytime telephone number)
Enclo	sed is a \$35.00 check made payable to the Department of State.
Amen Divisi P.O. E	ng Address: dment Section on of Corporations Box 6327 assee, FL 32314 Street Address: Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

	•		517.0502, 607.1508, or 617.3 ion organized under the laws	·		
Florida	• -	• •	ered office or registered ager	•		
of Florida.						
1. The name of	I. The name of the corporation: Dogleg Right, Inc.					
2. The princip	2. The principal office address: 5369 Lyons Road, Coconut Creek, FL 33073					
3. The mailing	g address (if diffe	rent):				
4. Date of inc	orporation/qualifi	cation: 12/14/2001	Document numbe	r: P01000118729		
5. The name a		of the current registe	red agent and registered offic	e on file with the		
	Coral Springs,	FL 33073		038		
6. The name changed):	or registered office (if					
	Larry A. Eisens 200 Golden Isle			——————————————————————————————————————		
		(P.O. Box or personal ma	ailbox NOT acceptable)			
	Hallandale, FL	33009		<u></u>		
agent, as char	nged will be ident	tical.	reet address of the business	_		
Such change authorized by	was authorized by the board, or the	y resolution duly add corporation has bee	opted by its board of director in notified in writing of the c	s or by an officer so hange.		
Jany	(mun	irman of the board)	Larry A. Eisenshtat, Director			
I hereby acce I further agre performance	pt the appointment to comply with of my duties, and	nt as registered agen the provisions of all I am familiar with a	trinted of typed name and a trining of typed name and a trining cap statutes relative to the properties accept the obligation of the merely to reflect a change on has been notified in writing the change on has been notified in writing the control of the control	pacity. er and complete ny position as		
Jany	Cum	lited	9/22/03			
If signing on bel	(Signature of Registered	Agent)	(Date)			
Larry A. Eisen			Registered Agent			
(Typed or Printed Name)			(Canacity)			

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