## P020000115

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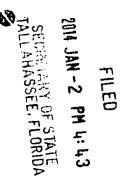
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## COVER LETTER

Amendment Section Division of Corporations

TO:

SUBJECT: ALFRED T. ROMANOSKI, INC.  Name of Corporation			
DOCUMENT NUMBER: PO20000 US			
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:			
ALFRED T. ROMANOSKI Name of Contact Person			
ALFREDT. ROMANOSKI, INC.			
2706 PALS A GRILLE WAY #5			
ST PETE BEACH FL 83706 City/State and Zip Code			
Romanoski & Comens, NET  E-mail address: (to be used for future annual report notification)			
For further information concerning this matter, please call:			
ALFRED T. ROMANOJKi at (941 812 3282  Name of Contact Person Area Code & Daytime Telephone Number			
Enclosed is a \$35.00 check made payable to the Department of State.			
Mailing Address: Street Address:			
Amendment Section Amendment Section			
Division of Corporations P.O. Box 6327  Division of Corporations Clifton Building			

2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314

## 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.
1. The name of the corporation: ALFRED T. ROMANOSKI, INC.
2. The principal office address: 2706 PASS A GRILLE WAY #5
ST. PETE REACH, FC 33706
3. The mailing address (if different): P.O. Box 999
DILLOW, CO 80435
4. Date of incorporation/qualification: 102 2002 Document number: PO20000115
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)
CROSS GTREET CORPONATE SERVICES WELL
_ 200 SOTH ORANGE AVE
SARASOTA, FL 34236
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):  ALFRED T. ROMMNOSKI
ACTION 1. ICOMINIOUSINI
P.O. Box NOT acceptable
ST. PETE BENCH, FL 33706
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.
Supportugated and officer or director  ALFRED T ROMA NOSKI PAFSI DINT
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.
12/27/2013
If signing on behalf of an entity:
ALFRED T. ROMANOSKI Typod or Printed Name

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

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