## P02000027374

(Re	equestor's Name)	
(Ad	Idress)	
<b>V</b>	,	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone #	· · · · · · · · · · · · · · · · · · ·
PICK-UP	WAIT	MAIL
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Certified Copies	_ Certificates o	T Status
Special Instructions to	Filing Officer:	
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Office Use Only



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TABLES STATE

## **COVER LETTER**

TO: Amendment Section Division of Corporations
SUBJECT: LANDAU INC Name of Corporation
DOCUMENT NUMBER: P0200027374
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:
Mame of Contact Person
LANDA W INC.
8667 Woodbrian Dr
Sarajota FL 34238 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:    Compared to the content of the c

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

•	rovisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this age is submitted for a corporation organized under the laws of the State of FC.	
in order	to change its registered office or registered agent, or both, in the State of Florida.	
1. The name of th	e corporation: LANDAU INC.	
2. The principal of	office address: Slob 7 Woodbriar DR	
<del></del>	Sarasota FL 34238	
3. The mailing ad	dress (if different): PO BOX 18205	
<del></del>	Savasota FC 34236	
4. Date of incorpo	pration/qualification: 31202 Document number: PO 20000 2	737
	street address of the current registered agent and registered office on file with the ment of State: (If resigned, enter resigned)	- Tig
_	MATTHEW RHEINGANS	
	355 IN VENICE AVE	3.52
_	VENICE FC 34285	7 TA
6. The name and s (if changed):	street address of the new registered agent (if changed) and /or registered office	MATIONS
` ,	Kint E. Lee, Ssa	40
~	3678 Country Place Rlyd	
~	P.O. Box NOT acceptable	
~	Sarasota FL 34233	
The street address as changed will b	s of its registered office and the street address of the business office of its registered agent, e identical.	
Such change was authorized by the	authorized by resolution duly adopted by its board of directors or by an officer so board, or the corporation has been notified in writing of the change.	
Hay In	hing Son It	
=	the appointment as registered agent and agree to act in this capacity, comply with the provisions of all statutes relative to the proper and complete performance I am familiar with and accept the obligation of my position as registered agent. Or, if this g filed merely to reflect a change in the registered office address, I hereby confirm that the seen notified in writing of this change.	
Sign	fure of Registered Apont 12/1/09 Date	
	· · · · · · · · · · · · · · · · · · ·	
If signing on beha	all of an entity:	
Тур	ed or Printed Name	
- 1		

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (8/05)

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