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(Re	questor's Name)				
(Ad	dress)				
(Ad	dress)	· · · · · · · · · · · · · · · · · · ·			
(Cit	y/State/Zip/Phon	e#)			
PICK-UP	MAIT WAIT	MAIL			
(Business Entity Name)					
(Document Number)					
Certified Coples	_ Certificate	s of Status			
Special Instructions to	Filing Officer:				





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J. Shivers OCT 25 2005

COVER LETTER

TO:	Amendment Section Division of Corporations
	Division of Corporations

SUBJECT: EDVARDO 2 SAMA INC.
(Name of Corporation)

DOCUMENT NUMBER: POLOGO 39326

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:

EDUARDO L SAMA
(Name of Contact Person)

EDVARDO L SANA INC (Firm/Company)

2970 W. FONTANA COURT (Address)

POYAL PACE BEACH, FL 33411
(City/State and Zip Code)

For further information concerning this matter, please call:

(Name of Contact Person) at (954) 773-7890

(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

statement of change	is submitted for a corpora	tion organized under	8, or 617.1508, Florida Statut the laws of the State of <u>FL</u> or both, in the State of Florid	ORISA
I. The name of the o	corporation: EDUA K	200 L SAMA	9 NC	v
	ice address: <u>2970</u>			
Roy.	AL PALM BE	ACH FLORA	8A 33411	
3. The mailing addr	ess (if different):	(5AME)		
4. Date of incorpora	tion/qualification: <u>04/</u>	n/o2 Docu	ment number: P6266	1939326
	eet address of the current r		gistered office on file with the	
	EDVANDO L	SAMA	<u> </u>	
	6610 PEOBLE	BEACH		د د د د د د د د د د د د د د د د د د د
	NORTH LAUDEN	NACE FZ 3	37068	
6. The name and str (if changed):	eet address of the new regi	stered agent (if change	ed) and /or registered office	
	2970 W. F.	ONTANA a	ant	05 Q
_	2970 W. Fr.	BEACH , F	L 33411	新 (12) (13) (13) (13) (13) (13) (13) (13) (13
	(P.O. Box N	IOT acceptable)		RY OF
The street address as changed will be	of its registered office and identical.	l the street address of	the business office of its reg	5
Such change was a authorized by the	uthorized by resolution decord, or the corporation h	uly adopted by its bo has been notified in w	ard of directors or by an offi riting of the change.	cer so
	f an officer or director)	<u> </u>	ANDO L SAM. (Printed or typed name and title)	A
Thomabu googant the	annointment of posiston	ed agent and agree to s of all statutes relati ept the obligation of hange in the registers his change.	÷ •	te performance ent. Or, if this onfirm that the
			1d19/05-	
Sign	are of Registered Agent)		(Date)	
If signing on behal	if of an entity:	•		•
(Турс	ed or Printed Name)	· · ·		·

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