

PD2000053898

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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20

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: DAR One Corp.
(Name of corporation)

DOCUMENT NUMBER: P020000 53898

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:

Darwin Fort
(Name of contact person)

~~Darwin~~ DAR ONE Corp
(Firm/Company)

13849 SW 144 PKY
(Address)

Okeechobee FL 34974
(City/state and zip code)

For further information concerning this matter, please call:

Darwin Fort at 954, 629-3257
(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
409 E. Gaines Street
Tallahassee, FL 32399

**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: DAR One Corp.
2. The principal office address: 13849 SW 144 Pky
Okeechobee FL 34974
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 5-13-02 Document number: PO2000053898
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

Darwin Fort
1802 Lake Osborne Dr
Lake Worth FL 33461

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

Darwin Fort - Same
13849 SW 144 Pky
(P.O. Box NOT acceptable)
Okeechobee FL 34974

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FLORIDA DEPARTMENT OF STATE

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.

Darwin Fort
(Signature of an officer or director)

Darwin Fort 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.

Darwin Fort
(Signature of Registered Agent)

3-30-05
(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