## P0000066030

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AULAHASSEE, FLORIDA

## TRANSMITTAL LETTER

TO:	Amendment Section	
	Division of Corporations	

SUBJECT: E- Literate Solutions, Foc. (Name of corporation)
DOCUMENT NUMBER: <u>PORODO 60030</u>
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:
The Shatz Kamar  Clame of person)
E-Literate Solutions, Inc. (Name of firm/company)
18612 MD 7th Stroot (Address)
Coral Springs FL 33071 (City/state and zip code)
For further information concerning this matter, please call:
The Shote Kamer at (45) 350 - 7367 (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
<u>florida</u> in order to change its registered office or registered agent, or both, in the State
of Florida.
1. The name of the corporation: E- Literate Solutions, Inc
2. The principal office address: 12612 MD 7th Stroot.
Caral Springs FL 33CF1
3. The mailing address (if different): 4110 NW 184 Drive Dearfield Boach
\
4. Date of incorporation/qualification: 6/13/02 Document number: POR 00006603C
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
Spiegal & Otrova, PA
1840 SID 22 ST. 4th Floor \$ ₹ ₹ 7
Mamy FL 33145
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Man und the street &
(P.O. Box or personal mailbox NOT acceptable)
be caral Springs, fl 3307-1
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.
I & ha & Manney The Shotz Kamer - Prosident
(Signature of an officer, chairman of vice chairman of the board) (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
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.
Signature by Resistered Agent) 8/2/3 (Date)
If signing on behalf of an entity:
Tina Shatzinamer Tresident (Typed or Reinfield Name) (Capacity)
* * * FILING FEE: \$35.00 * * *

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