## 10260117330

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SECRETARY OF STATE DIVISION OF CORPORATIONS

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## **COVER LETTER**

TO: Amendment Section Division of Corporations
SUBJECT: All Florida Elevator Inspections, Inc. (Name of Corporation)
DOCUMENT NUMBER: P02000117330
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:
Ordie Cornelius (Name of Contact Person)
All Florida Elevator Inspections, Inc. (Firm/Company)
P. D. Box 120581 (Address)
Fort Lauderdale, FL 33312 - 0010 (City/State and Zip Code)
For further information concerning this matter, please call:
Or die Cornelius at (954) 316-16 48 (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** Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## 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
in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: All Florida Elevator Inspections, Inc.
2. The principal office address: 3860 Inverrary Blvd., 54e 101m
Lauderhill, FL 33319
3. The mailing address (if different): P. O. Box 120581 Fort Lauder dale, FL
33312
4. Date of incorporation/qualification: 11 /2002 Document number: P02000117330
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
Drdie T. Cornelius
Florida Department of State:  Dr die T. Cornelius  333 NW 45 <sup>th</sup> Ave
Plantation, FL 33317
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Crompton C. Titus
776 NW 48th Ave (P.O. Box NOT acceptable)
Plantation, FL 33317
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.
(Signature of an officer or director)  ORdiz Cornetius of residual (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.
Crombion Titus 10/26/07. (Signature of Registered Agent) (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 CR2E045 (8/05)