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TRANSMITTAL LETTER

Amendment Section Division of Corporations

TO:

SUBJECT: Autumn Dogs, Inc.	(Name of corporation)
DOCUMENT NUMBER: POS	• •
	age of Registered Office/Agent and fee are submitted for filing.
	concerning this matter to the following:
Jeffrey M. Drier	
(Name of	person)
Autumn Dogs, Inc.	
(Name of firm	/company)
6512 Camden Bay Drive # 204	<u> </u>
(Addre	ess)
Tampa, FL 33635	. Yes
(City/state and	zip code)
For further information concern	ing this matter, please call:
Jeffrey M. Drier	at (813) 431-1537 (Area code & daytime telephone number)
(Name of person)	(Area code & daytime telephone number)
Enclosed is a \$35.00 check mad	le 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 t	he provisions of	sections (607.0502, 61	17.0502, 6	507.1508, c	r 617.150	98, Florida S	Statutes,
this statement Florida	of change is subr	•	a corporatione its register	~			•	
of Florida. 1. The name of	of the corporation:	Autumn	Dogs, Inc.					_
2. The princip	al office address:	6512 Ca	ımden Bay Dı	rive # 204			- <u> </u>	6
		Tampa, F					75	20
3. The mailing	g address (if differ	rent):					350	PP I
4. Date of inco	orporation/qualific	cation: _	04/30/2003	···	Document	number:	P03000042	F 5
	and street address partment of State: Watkins, Carl		rent register	ed agent a	nd register	ed office (on file with th	ne
	5103 Memoria	HWY						
	Tampa, FL 336	34				*****		
6. The name changed):	and street addres		new register	ed agent ((if changed	and /or	registered o	ffice (if
	6512 Camden E	6512 Camden Bay Drive # 204						
	Tampa, FL 336		x or personal mail	box NOT acce	eptable)			
The street add agent, as chan	lress of its registe ged will be ident	red office ical.	e and the stre	eet addres	s of the bu	siness off	ice of its reg	istered
Such change vauthorized by	was authorized by the board, or the	resolution corporati	on duly adop ion has been	ted by its notified i	board of d n writing c	irectors of the char	r by an officage.	er so
Signature of an office	er, chairman or vice chai	rman of the b	oard)	Jeffrey M.	Drier Pro	esidenț Lame and tit		
	ot the appointment to comply with to of my duties, and ont. Or, if this do the confirm							? d :e.
-Juff.	(Signature of Registered	Agenti		08/1	4/2003	ate)		 、 .
If signing on beh	/ -	. agouty			(D)	<i>,,,</i> ,		
	(Typed or Printed Name)		<u>,</u> <u>.</u>	<u> </u>	· ,	nacity)		

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