## Po 3000055984

(Requestor's Name)
14920 E. DANJE WILL DR.
14900 E. DANJE WILL DR.
Ersemon, Fl 34747
-
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
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## 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.
1. The name of the corporation: ACWAYS BOANTIFUL CREATIONS THE.
2. The principal office address: 14900 E. DRauge (AIQ Red) # 354
Kissimmer, Fr. 34747
3. The mailing address (if different):
4. Date of incorporation/qualification: 5/21(63 Document number: 703000 55984
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
D'ANA M. CARROLL
4265 N. US HWY 98 ST. 518:
KAKELAND FC. 33809
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
D'ANA M. CARROLL
(P.O. Box NOT acceptable)  # 354
Kissimmer, Fr. 34747
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)  (Signature of an officer or director)  (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.
(Signature of Registered Agent)
If signing on behalf of an entity:
O:AMS m. CANARY (Typod or Printed Name)

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