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(Req	uestor's Name)	
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SECRETARY OF STATE
SECRETARY OF STATE

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COVER LETTER

TO: Amendment Section Division of Corporations		
SUBJECT: BEE SHART, INC. (Name of corporation)		
DOCUMENT NUMBER: PO 3 000 1/841/		
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:		
MARCARUTA RUZ (Name of contact person)		
Bee SMART INC. (Firm/Company)		
3551 W. LAKE MAKY Blyd. Ste 209		
LAILE MANUE, FL 32746 (City state and zip code)		
For further information concerning this matter, please call:		
MANUALIZE at (107) 302 6482 (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.	
In order to change its registered office of registered agent, or bont, in the state of 1 torida.	
1. The name of the corporation: SEE SWART, INC.	_
2. The principal office address: 3551 W. LAKE MARY BIND STE 20°	7
LAKE MARY, FL 32744	
3. The mailing address (if different):	
4. Date of incorporation/qualification: 10 23 03 Document number: 103000/1841	1
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:	
Piorida Department of State.	
1 Erry Bledsoe	
1009 E. Hwy 436	
Altamoute Spas, 32701 FE &	
The state of the s	90 100 100 100 100 100 100 100 100 100 1
6. The name and street address of the new registered agent (if changed) and /or registered office	~
(if changed):	۰
MARCGARUTA CUZ	•
3551 W. Lake Mary Blyd Str 2002 or	
(P.O. Box NOT acceptable)	
LARLE MARY, FL 32746	
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 beard, or the corporation has been notified in writing of the change.	
MANUEL DISTORA POES	
(Signature of an officer of director) (Printed of 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 possibled in writing of this change.	
also loss	
(Days)	÷
If signing on behalf of an entity:	
(Typed or Printed Name)	

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