

PD3000/29544

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000132448350

07/11/08--01010--012 **35.00

FILED
2008 JUL 11 AM 10:34
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RA change
Plews
7-15-08



ALL FLORIDA FIRM INC

813 Deltona Blvd, Ste A
Deltona, FL 32725
Phone 386-575-1180

6/20/2008

Florida Department of State
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

RE: P03000129544

Please find a check and change of registered agent forms for the following corporations and/or LLC's.

G.S. CABINETS, INC.

3054 B NW 15 ST

MIAMI, FL 33125

Sincerely,

All Florida Firm, Inc.

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH
FOR CORPORATIONS**

JUN 20 2008

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.

1. The name of the corporation: **G.S. CABINETS, INC.**
2. The principal office address: **3054 B NW 15 ST MIAMI FL 33125**
3. The mailing address (if different): **3054 B NW 15 ST MIAMI FL 33125**
4. Date of incorporation/qualification: **11/10/2003** Document number: **P03000129544**
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

**GERARDO SOTOLONGO
3054 B NW 15 ST
MIAMI FL 33125**

FILED
2008 JUL 11 AM 10:34
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

**ALL FLORIDA FIRM INC
813 DELTONA BLVD STE A (Box #1274111)
DELTONA, FL 32725**

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)

(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)

June 12, 2008
(Date)

If signing on behalf of an entity:

Jackie Smith
(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 1274111