P03000153371

(Re	questor's Name)	<u>. </u>
(Ad	dress)	
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,		,
PICK-UP	TIAW	MAIL
(Bu	siness Entity Nai	me)
(Do	cument Number))
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COVER LETTER

TO: Amendment Section Division of Corporation	18			
SUBJECT:	Hatin & Ass			
	Name of (Corporation		
DOCUMENT NUMBER:	P03	3000153371		
The enclosed Statement of Char	nge of Registered Offic	ce/Agent and fee are su	abmitted for filing.	
Please return all correspondence	e concerning this matte	er to the following:		
	Lee F	P. Hatin ontact Person		
	Name of Co	ontact Person		
u 		Associates Company		
	riii/C	company	~	
	400 NIM	101st Ter.	{	
		dress	(New
			(•
	Coral Spring	ne Fl 33071)	
	City/State a	gs, FL 33071 and Zip Code		
	Landa da 🙃			
E-mail add	ress: (to be used for	gmail.com future annual report i	notification	
E-man add	ress. (to be used for	ruture amiuai report i	nourication)	
For further information concern	ing this matter please	cajl.		
i of fartier information concern	ing this matter, piease	can.		
Lee P. H	atin t Person	at (941) Area Code & D	488-041	12
Name of Contac	t Person	Area Code & D	Daytime Telephone	Number
Enclosed is a \$35.00 check mad	le payable to the Depar	rtment of State.		
<u>Mailing</u>	g Address:	Street Add		
	Iment Section	Amendmen		
	on of Corporations ox 6327	Clifton Bu	of Corporations	
	assee, FL 32314		niding cutive Center Circ	ele
- 2	· /-,		e, FL 32301	

CR2E045 (8/05)

TO:

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

•	ovisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this e is submitted for a corporation organized under the laws of the State of Florida	
	o change its registered office or registered agent, or both, in the State of Florida.	
1. The name of the	corporation: Hatin & Associates Ivc.	
	fice address: 400 NW 101st Ter., Coral Springs, FL 33071	
v FF		
3. The mailing add	ress (if different): Same as above.	
4. Date of incorpor	ration/qualification: 1/1/2004 Document number: P03000153371	
	reet address of the current registered agent and registered office on file with the ent of State: (If resigned, enter resigned)	
<u>L</u>	ee P. Hatin	
9	251 Oak Grove Cir.	
<u>D</u>	Davie, FL 33071 Formerly 379 Dolphin Shores, Nokomis, FL	
6. The name and state (if changed):	reet address of the new registered agent (if changed) and /or registered office	
<u>L</u>	ee P. Hatin	
4	00 NW 101st Ter., Coral Springs, FL 33071 P.O. Box NOT acceptable	
R	lecap: We have moved from Nokomis to Dave to Coral Sps.	
The street address as changed will be	of its registered office and the street address of the business office of its registered agent, identical.	
Such change was a authorized by the l	authorized by resolution duly adopted by its board of directors or by an officer so board, or the corporation has been notified in writing of the change.	
Jack	Tan officer or director CEE P. HOTIN MASIBENT Printed or typed name and title	
I hereby accept the I further agree to co of my duties, and I document is being corporation has be	e appointment as registered agent and agree to act in this capacity. comply with the provisions of all statutes relative to the proper and complete performance I am familiar with and accept the obligation of my position as registered agent. Or, if this filed merely to reflect a change in the registered office address, I hereby confirm that the een notified in writing of this change.	
Signatu	ore of Registered Agent Date	
If signing on behal	If of an entity: Wat jack	
* * * 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)