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COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Bedara Moragement Inc. (Name of Corporation)
DOCUMENT NUMBER: PCHOOOISGO2
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:
(Name of Contact Person)
Bedara Management Inc. (Firm/Company)
926 SW 3Gth Court (Address)
Boshdon Beach IL 33435 (City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Contact Person) at (56), 302 2849 (Area Code & Daytime Telephone Number)
The state of the s

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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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: Bedana Management Inc. 2. The principal office address: 926 GW 38th CT
Boynton Beach, FL 33435
3. The mailing address (if different):
4. Date of incorporation/qualification:
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
Beda Robert K walsh
921 Baryan Drive Delroy Beach, FL 33483 農園
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): Robert K Walsh 926 SW 38th CT (P.O Box NOT acceptable) Boynton Beach, FL 33435
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) Solution (Date)
If signing on behalf of an entity:
(Typed or Printed Name)

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (8/05)

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