## 04000021938

(Requestor's Name)							
(Address)							
. (Address)							
(City/State/Zip/Phone #)							
PICK-UP WAIT MAIL							
(Business Entity Name)							
(Document Number)							
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G. Goulilatte MAY 0 8 2997

## **COVER LETTER**

TO: Amendment Section
Division of Corporations

SUBJECT: NCRS, INC.

(Name of Corporation)

DOCUMENT NUMBER: P04000021938

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:

Natividad Santos	
(Name of Contact Person)	
(Firm/Company)	
3048 Joe Johns Road	
(Address)	
Middleburg, Fl. 32068	
(City/State and Zip Code)	
• • • • • • • • • • • • • • • • • • • •	

For further information concerning this matter, please call:

Natividad Santos at (904) 445 8975 (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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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

statement of chang	e is submitted for a	s 607.0502, 617.0502, 60 a corporation organized ered office or registered	under the laws of the St	ate of Florid	
1. The name of the				•	
	•	3048 Joe Johns	Road		
z. The principal of		Middleburg, Fl.			
3. The mailing add	ress (if different):_				
4. Date of incorpor	ration/qualification	ı: <u>1/29/2004</u>	Document number:	P04000021	.938
5. The name and st Florida Departm		current registered agent	and registered office on	n file with the	
_	Jeffrey Alan	Klepinger			
_	2895 Flatbus	h Place			
_	Green Cove S	prngs, Fl. 32043			O7 M SECTALL
6. The name and state (if changed):	treet address of the	new registered agent (if	changed) and /or regist	ered office	MAY - 1 AH CRETARY OF LAHASSEE, F
_	Natividad Sa	antos			E CF
	3048 Joe Joh				9: 2 FLORI
		(P.O. Box NOT acceptable)			5 A
_	Middleburg,	Fl. 32068		<del></del>	
The street address as changed will be	s of its registered of identical.	office and the street add	ress of the business off	fice of its register	ed agent,
Such change was authorized by the	authorized by res	olution duly adopted by poration has been notifie	its board of directors o	or by an officer singe.	o
Tables (Signature	of an officer or director,		Natividad (Printed or typed	Sentos Parame and title)	resident
I hereby accept th I further agree to of my duties, and document is being corporation has b	ne appointment as comply with the plant familiar with giled merely to refer to motified in wi	registered agent and ag provisions of all statutes n and accept the obligat eflect a change in the re iting of this change.	gree to act in this capa relative to the proper ion of my position as r gistered office address	city. and complete per egistered agent. , I hereby confiri	rformance Or, if this m that the
Mode	86-		APIR 16 2	2007	
	iture of Registered Agen	<u> </u>	(Date	)	
If signing on beha	alf of an entity:				
(Тур	ped 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

• "

CR2E045 (8/05)

APPRUYE AND FILED