

P04000043260

Florida Department of State
Division of Corporations
Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H06000245970 3)))



H060002459703AEC0

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850) 205-0380

From:

Account Name : MARY G. STEWART, CPA, P.A.
Account Number : I20060000050
Phone : (941) 358-3191
Fax Number : (941) 258-3190

REGISTERED AGENT CHANGE

ALL STATE BAIL BONDS, CORP.

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$35.00

RECEIVED

06 NOV -1 AM 8:00

DIVISION OF CORPORATIONS

SECRETARY OF STATE
TALLAHASSEE FLORIDA

06 NOV -1 AM 10:39

FILED

Electronic Filing Menu

Corporate Filing Menu

Help

NOV 01 2006
R O

((H060002459703))

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.

1. The name of the corporation: ALL STATE BAIL BONDS, CORP.
2. The principal office address: 265 E Marion Avenue #113, Punta Gorda, FL 33950
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 3/10/2004 Document number: P04000043260
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

Onil Martinez1629 NW 11th StreetCape Coral, FL 33993

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

Onil Martinez265 E Marion Avenue #113

(P.O. Box NOT acceptable)

Punta Gorda, FL 33950

FILED
06 NOV - 1 AM 10:39
SECRETARY OF STATE
TALLAHASSEE FLORIDA

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]
(Signature of an officer or director)

Onil Martinez, President

(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]
(Signature of Registered Agent)

10-31-06

(Date)

If signing on behalf of an entity:

Onil MARTINEZ
(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

CR2B045 (R/05)

((H060002459703))