P04000018220

(Re	questor's Name)	
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PICK-UP	MAIT	MAIL
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Special Instructions to	Eiling Officer:	
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Office Use Only



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COVER LETTER

TO:	Amendment Section Division of Corporations						
SUBJ	JECT:	SMITH PROCESS		NC.			
		(Name of co	orporation)				
DOC	UMENT NUMBER:	P040000	78220				
The e	nclosed Statement of Change	of Registered Office	e/Agent and fee a	are submitted for filing.			
Please	e return all correspondence co	oncerning this matter	to the following	;			
		BEATRICE (Name of cor					
		SMITH PROCESSI (Firm/Co		NC.			
			(813567				
HOLLYWOOD, FLORIDA 33081-3567 (City/state and zip code)							
For fu	arther information concerning	` •	• •				
	BEATRICE R SMITI	Н	at (954	₎ 394-4604			
	(Name of contact p	erson)	(Area cod	394-4604 e & daytime telephone number)			
Enclo	sed is a \$35.00 check made p	payable to the Depart	ment of State.				
	Mailing A Amendme Division o P.O. Box 6 Tallahasse	ddress: nt Section f Corporations 5327 e, FL 32314	Divisio 409 E.	Address: dment Section on of Corporations Gaines Street assee, FL 32399			

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

statement of ch	e provisions of section nange is submitted for der to change its regis	a corporation org	ganized under the	e laws of the State o	FLOR	RIDA		
	f the corporation:		PROCESSING S		, i tortat	4.		
	al office address:					· · · · ·		
z. rue principa	if office address		WOOD, FLORID					
3. The mailing	address (if different)							
4. Date of inco	rporation/qualificatio	n: MAY 14, 20	04 Docume	ent number:	204000 6	078220		
	nd street address of th artment of State:	e current registere	d agent and regis	stered office on file	with the			
		BEATRICE F	R SMITH			₹		
		3825 E SHO	DRE RD			SECR	05 FI	
		MIRAMAR, FLO	RIDA 33023-495			ETAE	FEB-7	**
6. The name ar (if changed):	nd street address of th	e new registered a	gent (if changed)	and /or registered (office	SEC. FLORIC	7	ara tun fant
		BEATRICE	R SMITH			RID!	t: t3	
		8127 SW 21S	ST COURT					
		(P.O. Box NOT accepts	able)					
	N	MIRAMAR, FLORI	DA 33025-2262					
The street addras changed wit	ress of its registered	office and the stre	eet address of the	e business office o	f its reg	istered a	gent,	
	yas authorized by reside board, or the cor							
BEATRICE R SMITH				IITH				
· /////	dure an other or director			(Printed or typed name a				
I hereby accep I further agree of my duties, a document is be corporation h	of the appointment as to comply with the and I am familiar wit the fited thereby to r as been hanfied in w	s registered agent provisions of all s h and accept the c reflect a change in riting of this chan	and agree to ac tatutes relative to obligation of my 1 the registered of 1ge.	t in this capacity. to the proper and c position as registe office address, I he	omplete ered age rehy coi	perform nt. Or, nfirm the	nance if this at the	
\times ////				February 2, 20	05			
JY 18	ishatus of Registered Ager	at)		(Date)				
If signing on b	chalf of an entity:							
	ATRICE R SMITH							
	(Typed or Printed Name)							

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