P0400086350

/D _e	equestor's Name)	
(Re	questors Name)	
(Ac	ldress)	
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(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bı	ısiness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	rtified Copies Certificates of Status	
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Special Instructions to	Filing Officer;	
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Office Use Only



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FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

May 19, 2005

ERTY, INC. 304 POINCIANA DR SUNNY ISLES, FL 33160

SUBJECT: ERTY, INC.

Ref. Number: P04000086380

We have received your document for ERTY, INC. and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The wrong form was used for a Florida profit corporation. Please complete the attached form and resubmit for filing.

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6957.

Pamela Smith Document Specialist

Letter Number: 605A00036164

COVER LETTER

D14121	dment Section on of Corporations
SUBJECT:	EQTY INC (Name of corporation)
DOCUMENT	NUMBER: POLOOOO 86 380
The enclosed S	Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please return a	ill correspondence concerning this matter to the following:
	Name of contact person)
	(Firm/Company)
00 to 10 to	
CA OF CIPTOSALTS	
COLUMN OF CIVITION	
O . O . O . O . O . O . O . O . O . O .	304 POINCIANA DQ. (Address)

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 409 E. Gaines Street Tallahassee, FL 32399

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: ERY, BNC,
2. The principal office address: 300 POINOIANA DRIVE SUNN Y BS VES FC 33160
3. The mailing address (if different):
4. Date of incorporation/qualification: LINE 2, 2004 Document number: Po4000086380
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
CORDINECT AGENTS, IN
102 NORTH MERIDIAN STREET, LOWERLOWD
TOLLAMADEE, FL 32891 PF & T
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
BOL POINCIANO DR PRE I
SUNNY 25LES FL, 33160
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, of the corporation has been notified in writing of the change.
Provide or transport
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 positived in writing of this change.
(Signature of Registered Agent) (Date)
If signing on behalf of an entity:
LOSE D'AMATO
(Typed or Printed Name)

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