## P0400089629

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06 SEP 25 AM II: 07

B 9/27/05

This is to change the locations of Gersagianterprised.

To 7610 strendle readopt 6-104

Milywood Fr (33024)

I'm not sure if this is the correct document.

## **COVER LETTER**

TO: Amendment Section Division of Corporations				
SUBJECT: GERSAGI ENTERPRISES INC. (Name of Corporation)				
DOCUMENT NUMBER:				
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)				
(Firm/Company)				
7610 STIRLING ROAD APT 6.104 (Address)				
HOLYWOOD FL (33024) (City/State and Zip Code)				
For further information concerning this matter, please call:				
OERSAIN GIL at (786) 487 5334  (Name of Contact Person) (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

## FILED 06 SEP 25 AMII: 07

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

	10110011101		
-	of sections 607.0502, 617.0502,		
	itted for a corporation organiza its registered office or registere		
1. The name of the corporat	ion: GERSAGI EL	HOEDRISES.	INC.
2. The principal office addre	*ss: 7610 5	tuling Pol A	23024 23024
3. The mailing address (if di	ifferent):		
4. Date of incorporation/qua	alification:	Document number:	
<ol><li>The name and street address Florida Department of Street</li></ol>		1 (President)	
	BERSAGI E	NTERPRISES 7	MC.
	4204 NW	201 STREET	
	MIAMI FL	- 33022	
6. The name and street addr (if changed):	ess of the new registered agent	(if changed) and /or registe	
		iterprises I	•
		ING ROAD A	PTG-104
,	(P.O. Box NOT acceptable)	FL 33024	<u> </u>
The street address of its reas changed will be identicated	gistered office and the street a	ddress of the business offi	ce of its registered agent,
Such change was authorized by the board, or	ed by resolution duly adopted r the corporation has been not	by its board of directors or ified in writing of the chan	by an officer so
Signatury of an office		(Printed or typed n	* *
I hereby accept the appoin I further agree to comply v of my duties, and I am fam document is being filed me corporation has been notif	iment as registered agent and with the provisions of all status iliar with and accept the oblig rely to reflect a change in the fied in writing of this change.	l agree to act in this capac tes relative to the proper a gation of my position as re registered office address,	ity. nd complete performance gistered agent. Or, if this I hereby confirm that the
(Signatury of Regi	Stered Agent)	09/20	106
Caraman an area.		(-24)	

If signing on behalf of an entity: