## P04000099942

(Re	equestor's Name)	
(Ac	ldress)	
(Ac	idress)	
(Ci	ty/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL MAIL
(Bi	isiness Entity Nam	ne)
(Document Number)		
Certified Copies	Certificates	of Status
Special Instructions to Filing Officer:		

Office Use Only



900106498139

08/15/07--01021--018 \*\*35.00

Ro Chy

07 AUG 15 AM 10: 06

T. Roberts AUG 2 0 2007

## COVER LETTER

For further information concerning this matter, please call:

(Name of Contact Person) at (914) 753 - 0937 (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

TO:

Amendment Section Division of Corporations

## 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 + VOESOO in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: MASSOX PUILLES, IAC.
2. The principal office address: 97336 Capaul Tearic
3. The mailing address (if different):
4. Date of incorporation/qualification: 7/02/204 Document number: 80400099945
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
William H. MASSEX
97228 Mussey Way 55 E
Unlee, FC 32007 55 5 7
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
William A. Mossox
97336 COROUR TRAIL
Unle FC 32097
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 yourd, or the corporation has been notified in writing of the change.  (Signature of the affect of director)  (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 of Registered Agent)  (Signature of Registered Agent)
If signing on behalf of an entity:
W: Dian & Mossox

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