## P040001426P8

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## COVER LETTÉR

TO: Amendment Section Division of Corporations
SUBJECT: GRANDERS (Name of Corporation)
DOCUMENT NUMBER: 04000142688
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:
GENTIAN KRAJA (Name of Contact Person)  (Firm/Company)  30 SE 3 PL (Address)
DANIA BEACH FL 33004 (City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Contact Person) at (954) 588 8734 (Area Code & Daytime Telephone Number)
Enclosed is a \$25.00 short made acceptant who Demotrates at \$5500.

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

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

statement of char	rovisions of sectior ige is submitted for to change its regis	a corporati	on organ	iized und	er the laws o	f the State of $\_$	FLOR	
	to change its regis		-	_			ioriuu.	
	office address:			3 rd	PL			
						33004	······································	
3. The mailing ad	dress (if different):	:	<del></del>					
4. Date of incorp	oration/qualificatio	n: <u>19</u> -1	5-200	2 <b>4</b> Do	ocument num	ber: <b>104</b>	000 4	2688
5. The name and Florida Depart	street address of the ment of State: 910		gistered a	ngent and こ w	registered of	ffice on file wit	th the	123 AM
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6. The name and (if changed):	street address of th GENFA 30 S VAN 1	ân Kro	aja Acut	PLACE F	<u> </u>		ice - -	
	ss of its registered be identical.							i agent,
Such change was authorized by the	s authorized by re- e board, or the cor	solution dul poration ha	y adopte s been no	ed by its of	board of dire writing of t	ectors or by an he change.	officer so	
(Signalui	e of an officer or direct	/			GENT (Printed	1AU K	RAJA-	
I hereby accept a I further agree to of my duties, and document is bein corporation has	the appointment of comply with the discountry with the discount of the discount of the discountry to the discountry to the discountry to the discountry discountry to the discountry discou	registered provisions of h and accep reflect a/cho riting of thi	agent ar of all star of the ob- inge in the s change	nd agree tutes rela ligation he regist	to act in thi. ative to the p of my position ered office a	s capacity. roper and con on as registere ddress, I herei	nplete perfo d agent. O by confirm	ormance r, if this that the
Siz	nature of Registered Age	nt)			10-17	-06 (Date)		
If signing on bel		Y				, ,		
	YPED OF Printed Name)	RAJA						

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