

PO4000143249

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

(Document Number)

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STATE

gr R.A
Change

LAW OFFICES OF
ROBERT FELDMAN, P.A.

SUITE 102
33 SOUTHEAST 4TH STREET
BOCA RATON, FLORIDA 33432

(561) 392-6090
BROWARD (954) 427-6200
TELEFAX (561) 395-4701

January 26, 2005

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: Grace Supply, Inc.

Dear Sir or Madam:

Please find enclosed a change of Registered Agent/Address for the above corporation and my check in the amount of \$35.00.

Please don't hesitate to contact me should you have any questions.

Very truly yours,



Robert Feldman

RF/pj

enc

myfiles/carvera divcorp.ltr

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Grace Supply, Inc.
(Name of corporation)

DOCUMENT NUMBER: P04000143249

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:

Gerard Cavera
(Name of contact person)

Grace Supply, Inc.
(Firm/Company)

1402 SW 45 Way
(Address)

Deerfield Beach, Fl. 33442
(City/state and zip code)

For further information concerning this matter, please call:

Gerard Cavera at (954) 427-5268
(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
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: Grace Supply, Inc.
2. The principal office address: 1402 SW 45 Way
Deerfield Beach, Fl. 33442
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 10-18-04 Document number: P04000143249
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
Robert Feldman
33 SE 4th Street Ste 102
Boca Raton, Fl. 33432
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Gerard Cavera
1402 SW 45 Way
(P.O. Box NOT acceptable)
Deerfield Beach, Fl. 33442

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TALLAHASSEE, FLORIDA

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, or the corporation has been notified in writing of the change.

X 
(Signature of an officer or director)

Gerard Cavera

(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.

X 
(Signature of Registered Agent)

Jan 24/05
(Date)

If signing on behalf of an entity:

(Typed or Printed Name)

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314