P04000144628

(Re	equestor's Name)	,			
(Ad	ldress)				
(Ad	ldress)				
(Cit	ty/State/Zip/Phon	e #)			
PICK-UP	☐ WAIT	MAIL			
(Bu	isiness Entity Nar	ne)			
(Document Number)					
Certified Copies	Certificates	s of Status			
Special Instructions to Filing Officer:					
	<u> </u>				

Office Use Only



300188419963

300188419963 12/15/10--01011--013 **35.00

2010 DEC 15 PH 4: 08
SECRETARY OF STATE
ALL AHASSEF, FLORIDA

R.A.

B DEC 20 2010

COVER LETTER

TO: Amendment Section Division of Corporations					
SUBJECT: COLBERT INC Name of Corporation					
DOCUMENT NUMBER: P04000144628					
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:					
Rafael Giampetruzzi					
Name of Contact Person					
Colbert Inc					
Firm/Company					
3845 NW, 57 Place,					
Address					
The state of the s					
Virginia Gardens, Fl 33166 City/State and Zip Code					
City/State and Zip Code					
rgiamp@colbertinc.com					
E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please call:					
Rafael Giampetruzzi at (786) 3446463					
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 Street Address: Amendment Section					
Division of Corporations P.O. Box 6327 Division of Corporations Clifton Building					
P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle					
Tallabara El 2001					

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

statement of cha	nge is submitted for a cor	poration organizea	07.1508, or 617.1508, Flo l under the laws of the Stat agent, or both, in the Stat	te of Florida
1. The name of t	the corporation: Colber	t,inc.		
2. The principal	office address: 3845 N	N, 57 Place, Vir	ginia Gardens, Florid	da 33166
3. The mailing a	ddress (if different):			
4. Date of incorp	poration/qualification:	10-14-2004	_ Document number:	P04000144628
	street address of the curr tment of State: (If resigne		and registered office on f	ile with the
	Rafael Giampetruzz	<u></u>		
	4765 NW, 103 Cou	rt, Doral, Florida	33178	. .
				ZOIO DEC SECRETO
6. The name and (if changed):	street address of the new	registered agent (if	changed) and /or register	ARY ARY
	Rafael Giampetruzz	<u>.</u>		E.FLOR
	3845 NW, 57 Place	, Virginia Garde		TATE OR
The street addre as changed will	ss of its registered office be identical.	and the street add	ress of the business office	e of its registered agent,
Such change wa authorized by th	s authorized by resolution board, or the corporati	on duly adopted by on has been notifie	its board of directors or it is done in writing of the chang	by an officer so e.
Signatu	e d an officer or director		Rafael Giampetru	
l further agree t of my duties, and document i s bei	o comply with the provis d I am familiar with and	ions of all statutes accept the obligati a change in the re	ree to act in this capacit relative to the proper an ion of my position as regi gistered office address, I	d complete performance istered agent. Or, if this
	nature of Registered Agent		12-13- Date	10
ــــــ <u>ا</u>	half of an entity:		Date	
Chiat	15 INC			
Ty	rped or Printed Name			

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