P05000021371

(Re	equestor's Name)	
(Ad	(dress)	<u></u>
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	;#)
		MAIL
(Bu	siness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special instructions to	Filing Officer:	
<u> </u>	Office Use Onl	 y



01/30/06--01004--012 **35.00



RAChange 2/2/06 X

COVER LETTER

TO: Amendment Section Division of Corporations

. LUCIE Kempdeling; Name of Corporation) SUBJECT: 70500021371 **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) Pemodelw (Firm/Company) 9DI MO and St. (Address) VEVO BEOCH FL 33467 (City/State and Zip Code)

For further information concerning this matter, please call:

at (<u>112)</u> <u>216</u> <u>1259</u> (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

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 $\underline{Florida}$ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: St. WCie Berodeling Inc.				
2. The principal office address: <u>710 and 3t</u>				
Vero Beach, FL 32962				
3. The mailing address (if different):				
<u></u>				
4. Date of incorporation/qualification: <u>2-19-05</u> Document number: <u>P05000021371</u>				
The name and street address of the current registered agent and registered office on file with the Florida Department of State:				
Todd Johnson				
1182 Binney Dr				
Ft. Prerce, FL 34949				
6. The name and street address of the new registered agent (if changed) and /or registered office				
(it changed): <u>E. Todd Johnson</u>				
710 and St.				
(P.O. Box NOT acceptable)				
Vero Beoch, 1-L 32462				

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.

m ð of an officer or director)

and fifle)

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.

ture of Registered Agent)

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

CR2E045 (8/05)