

PO5 00 0028996

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

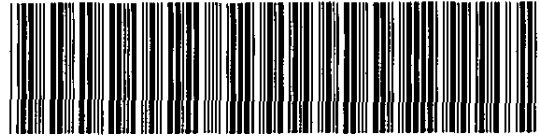
(Business Entity Name)

(Document Number)

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June 27, 2011

To : Department of State
Division of Corporations
Corporate Filings
P.O. Box 6327
Tallahassee, Fl. 23214
FAX. (850) 245-6897

SENT VIA FACSIMILE

Re : Change of address

Gentlemen,

Please change our address accordingly :

Document # : P05000028996

Date of incorporation : 02/05

Street Address :

Custom ChopperWerks, Inc.
1801 8th. Ave. W.
Palmetto, Fl.

Mailing Address :

Custom ChopperWerks, Inc.
P.O. Box 1267
Palmetto, Fl. 34220

Officer Address :

Robert Rowe
1801 8th Ave. W.
Palmetto, Fl. 34221

Sincerely,

A handwritten signature of Robert Rowe, consisting of stylized initials and a surname, followed by a horizontal line.

Robert Rowe, Pres.