P0500046871

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(City/State/Zip/Phone #)				
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SECRELARY OF STATE
ALLAHASSEE, FLORIDA

Or Slow

COVER LETTER

TO:	Amendment Section Division of Corporations			
SUBJE	CCT: PITA GARDEN, INC. (Name of Corp	oration)		
DOCUMENT NUMBER: P05000046871				
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:		
	John J. Kabboord (Name of Contact	d, Jr., Attorney et Person)		
John J. Kabboord, Jr., P.A. (Firm/Company)				
	1980 N. Atlantic Av (Address	venue, Suite 801		
	COCOA BEACH, (City/State and 2	FLORIDA 32931 Zip Code)		
For furt	ther information concerning this matter, please call	:		
	Karen Reeves (Name of Contact Person)	at (<u>321</u>) <u>799-3388</u> (Area Code & Daytime Telephone Number)		
Enclose	ed is a \$35.00 check made payable to the Departme	nt 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 cha	ange is submitted for a corporation org	0502, 607 , 1508 , or 617 , 1508 , Florida State anized under the laws of the State of FL istered agent, or both, in the State of Flor	ORIDA
1. The name of	the corporation: PITA GARDEN 1	NC.	·
2. The principal	office address:		
3450 Oce	an Beach Boulevard, Unit 703,	Cocoa Beach, FL 32931	
3. The mailing a	ddress (if different):		
4. Date of incorp	poration/qualification: February 20	06 Document number: _P050000	46871
5. The name and Florida Depar	rtment of State: (If resigned, enter resig	d agent and registered office on file with t gned)	the SE
			FILED IFEB -5 PH CKLTAKY OF S LAHASSEE, FI
6. The name and (if changed):	street address of the new registered ag	gent (if changed) and /or registered office	1: 55 TATE ORIDA
	John M. Hearin		
	1041 Bali Road (P.O. Box NOT accepta	ible)	
	COCOA BEACH, FLORIDA 3	32931	
The street addre as changed will	ess of its registered office and the stre be identical.	et address of the business office of its r	egistered agent,
Such change was authorized by the	as authorized by resolution duly adop ne board, or the corporation has been	oted by its board of directors or by an of notified in writing of the change.	ficer so
//	m few	John M. Hearin, Pres (Printed or typed name and title)
I hereby accept I further agree to of my duties, and document is bei corporation has	the appointment as registered agent to comply with the provisions of all st d I am familiar with and accept the o ng filed merely to reflect a change in s been notified in writing of this chan	and agree to act in this capacity, tatutes relative to the proper and compl obligation of my position as registered a the registered office address, I hereby t ge.	ete performance agent. Or, if this confirm that the
a John	mature of Registered Agent)	January 29, 2009	
If signing on be	half of an entity:		
John	M. Hearn Typed or Printed Name)		

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