P05000055222

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

AND

R-A-Charge
C. Courliette SEP 1 1 2007

COVER LETTER

TO: Amendment Section Division of Corporations				
21				
SUBJECT: CFIRSTCLASSCORP.				
(Name of Corporati	on)			
DOCUMENT NUMBER: P05000055222				
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:				
NORMAN MALINSKI				
(Name of Contact Person)				
LAW OFFICE NORMAN MALINSKI P.A. (Firm/Company)				
(m. company)	,			
2875 NORTHEAST 191ST. STREET 毕508				
(Address)				
AVENTURA, FLORIDA 33180				
(City/State and Zip Code)				
For further information concerning this matter, please call:				
NORMAN MALINSKI at (305) 937 4242			
(Name of Contact Person)	Area Code & Daytime Telephone Number)			
Enclosed is a \$35.00 check made payable to the Department of State.				
No. 17	Charact A. M. Francis			
<u>Mailing Address:</u> Amendment Section	Street Address: Amendment Section			
Division of Corporations	Division of Corporations			
P.O. Box 6327	Clifton Building			
Tallahassee, FL 32314	2661 Executive Center Circle			
	Tallahassee, FL 32301			

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, inge is submitted for a corporation organized under the laws of the State of \underline{FLORII} r to change its registered office or registered agent, or both, in the State of Florida.	
1. The name of	the corporation: CFIRSTCLASSCORP.	
	office address: 1100 LEE WAGENER BLVD. SUITE 205	
	RDALE, FLORIDA 33315	
3. The mailing a	address (if different):	
4. Date of incorp	poration/qualification: 4/14/2005 Document number: P05000055222	
	I street address of the current registered agent and registered office on file with the riment of State:	
	MARIA SPERANDO ESQ.	
	GARY, WILLIAMS, SPERANDO P.L	<u></u> 1 _
	221 EAST OSCEOLA ST. STUART FL.34994	07 SEP SECRE
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):		
	NORMAN MALINSKI ESQ.	OF S
	2875 NORTHEAST 191ST STREET	AM II: 32 OF STATE E. FLORID
	(P O. Box NOT acceptable)	Ď., .0
	AVENTURA, FL. 33180	****
The street addr as changed will	ess of its registered office and the street address of the business office of its regis be identical.	tered agent,
Such change w authorized by t	as authorized by resolution duly adopted by its board of directors or by an office the board, or the corporation has been notified in writing of the change.	r so
/\/\/\\	GABRIELLE GRISWOLD BRANDT (Printed or typed name and title)	
I hereby accept I further agree of my duties, ar document is be corporation ha	t the appointment as registered agent and agree to act in this capacity. to comply with the provisions of all statutes relative to the proper and complete and I am familiar with and accept the obligation of my position as registered agen ing filed merely to reflect a change in the registered office address, I hereby conf s been notified in writing of this change.	performance t. Or, if this irm that the
(Si	gnature of Registered Alem) (Date)	,
If signing on be	ehalf of an entity:	
GABRIELLE	GRISWOLD BRANDT	
	Typed or Printed Name)	-

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