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Randall Stofft Architects 42 N. Swinton Ave Suite #1 Delray Beach, FL 33444
(City/State/Zip/Phone #)
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R.A. Change C.COULLIETTE

AUG 06 2009

EXAMINER

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

statement of change is submitted for a corporation organized under the laws of the State of Florida. in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: ADMIRGL STOFFT ENTERPRISES INC
2. The principal office address: 42 N. Swinton Ave STE 1 Deiray Beach FL 33444-263
3. The mailing address (if different):
4. Date of incorporation/qualification: MAY 31, 2008 Document number: POSOO007855
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)
Resigned
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
RANDAII STORET
DEIRay BEACH FC 334485
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. Randell Stoff T Printed or typed name and title
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. Signature of Registers Agent
If signing on behalf of an entity:
Typed or Printed Name

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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