P05000019370

(Re	questor's Name)	
. (Ad	dress)	
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(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu:	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to I	Filing Officer:	



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COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Mina Tile Company Inc. (Namle of Corporation)
DOCUMENT NUMBER: PO 500 00079370
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:
MICHELE CHIARELLO (Name of Contact Person) MIANA T. LE (OMPANY TWO (Firm/Company) 1601 BIG TREE RO# 905 (Address)
DAYTONA BEACH, F 1 32119 (City/State and Zip Code) For further information concerning this matter, please call:
MICHELE CHIRACIJO at (386) 2355066 (Name of Contact Person) (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 in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: MIANA T. IE COMPANY TO
2. The principal office address: 1601 Bis 7RIE Ro # 905
3. The mailing address (if different):
4. Date of incorporation/qualification: 6-1-2005 Document number: Posoco79370
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
JOHN H MCINARNAY
1601 BIG TREE RO # 905
DAYTONA BEACH F1 32119
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
MICHELE CHIACELLO 1601 BIL TREE RD # 905 (P.O. Box NOT acceptable)
DAYTONA BOACH FI 32119
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.
(Signature of an officer or director) (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 potified in writing of this change.
(Signature of Registered Agent) (Date)
If signing on behalf of an entity:
MICHELE CHARELLO (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)