## P050001404

(Re	equestor's Name)			
. (Ad	ldress)			
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(Cit	ry/State/Zip/Phon	e #)		
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(Bu	siness Entity Nar	me)		
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TAIL AHASSEE, FLORIDA

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## **COVER LETTER**

TO: Amendment Section Division of Corporations	
SUBJECT: CLEAN BEES INC. (Name of Cor	noration)
(Number Col	polation
DOCUMENT NUMBER: P05000140410	
The enclosed Statement of Change of Registered Office/	Agent and fee are submitted for filing.
Please return all correspondence concerning this matter t	o the following:
MARIA ARANGO (Name of Cont	act Person)
(Name of Cont	act i cison;
(Firm/Con	nany)
(i iiii con	.pa.;,)
1975 DADNADY WAY	
1375 DARNABY WAY (Addre	(22)
(-144-14	,
ORLANDO, FL 32824	
(City/State and	Zip Code)
For further information concerning this matter, please ca	11:
MIRTHA VALDES MARTIN CPA	at ( 407 ) 321-3554
(Name of Contact Person)	at (407) 321-3554 (Area Code & Daytime Telephone Number)
Enclosed is a \$35.00 check made payable to the Departm	nent of State.
Mailing Address: Amendment Section	Street Address:
	Amendment Section
Division of Corporations P.O. Box 6327	Division of Corporations Clifton Building
P.O. Box 6327 Tallahassee, FL 32314	2661 Executive Center Circle
1 unanassee, 1 D 323 14	Tallahassee, FL 32301

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

statement of cha	nge is submitted for a corporation of	7.0502, 607.1508, or 617.1508, Florida Stat organized under the laws of the State of FL egistered agent, or both, in the State of Flor	ORIDA
1. The name of t	he corporation: CLEAN BEES, INC.		
		TREET SUITE 316, KISSIMMEE, FL 3474	<u>!1</u>
3. The mailing a	ddress (if different):		
4. Date of incorp	poration/qualification: 10/13/2005	Document number: P05000140	)410
	I street address of the current register trnent of State:	red agent and registered office on file with t	he
	MARIA E. RAMIREZ		
	722 DEAN CREEK LANE		
	ORLANDO, FL 32825		TASI CR
6. The name and (if changed):	street address of the new registered	agent (if changed) and /or registered office	SEP 25
	MARIA ARANGO		SEE. R
	1375 DARNABY WAY		3: 43
	(P.O. Box NOT acce	eptable)	18 <b>5</b>
	ess of its registered office and the s be identical.	treet address of the business office of its r	
authorized by th	ne board, or the corporation has been	opted by its board of directors or by an of en notified in writing of the change.  MARIA ARANGO, PRESIDENT	
· <del>-</del>	ure of an officer or director)	(Printed or typed name and title	<del>:)</del>
I hereby accept I further agree to of my duties, an document is bei corporation has	the appointment as registered age to comply with the provisions of al ind I am familiar with and accept th ing filed merely to reflect a change is been notified in writing of this ch	nt and agree to act in this capacity. I statutes relative to the proper and comp e obligation of my position as registered o in the registered office address, I hereby ange.	lete performance igent. Or, if this confirm that the
	ud amon "	9/21/06	
	gnature of Registered Agent) chalf of an entity:	(Date)	
	Typed or Printed Name)		

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

F. CHECKS PAYARI E TO FLODIDA DEPARTMENT OF S