P0600000336

(Re	equestor's Name)	
(Ad	ldress)	
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COVER LETTER

TO: Amendment Section Division of Corporations			
SUBJECT: LOUIS SHAW ENTERPRISES, INC. (Name of Corporation)			
DOCUMENT NUMBER: P06000002236			
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:			
LOUIS W. SHAW (Name of Contact Person)			
LOUIS SHAW ENTERPRISES, INC. (Firm/Company)			
4000 ALTON WENTWORTH RD (Address)			
GREENVILLE, FL 32331 (City/State and Zip Code)			
For further information concerning this matter, please call:			
LOUIS W SHAW at (850) 584-3520 (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 Tollebasses 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 FLORIDA
in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: LOUIS SHAW ENTERPRISES, INC.
2. The principal office address: 4000 ALTON WENTWORTH RD, GREENVILLE, FL 32331
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3. The mailing address (if different): P.O. BOX 552, SHADY GROVE, FL 32357
4. Date of incorporation/qualification: 01-05-2006 Document number: P06000002236
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
BARBARA COULTHURST PER S
172 W MAIN STREET
MAYO. FL 32066
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
LOUIS W. SHAW
4000 ALTON WENTWORTH RD
(P.O. Box NOT acceptable)
GREENVILLE, FL 32331
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) LOUIS W SHAW, PRESIDENT (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.
3/27/06
(Signature of Registered Agent) (Date)
If signing on behalf of an entity:
LOUIS W SHAW
(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)