POWW01288

(Requestor's Name)	
(Address)	
(Address)	•
(City/State/Zip/Phone #)	•
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	•
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	
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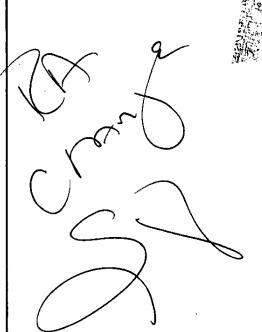
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COVER LETTER

Amendment Section Division of Corporations

TO:

CUDIECT.	THE SISTERS CLEANIN	G SERVICES INC			
SUBJECT:	Name of Co	prporation			
DOCUMENT NUI	MBER: P060	000011288			
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:					
-	ASHLEY E Name of Cor				
THE SISTERS CLEANING SERVICES, INC. Firm/Company					
	2008 E. 1147 Add				
TAMPA, FL 33612 City/State and Zip Code					
THESISTERSCLEANING@GMAIL.COM E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please call:					
	SHLEY BARBERY ne of Contact Person	at (813) 389-8753 Area Code & Daytime Telephone Number			
Enclosed is a \$35.0	0 check made payable to the Depart	ment 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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida ange is submitted for a corporation organized under the laws of the State of er to change its registered office or registered agent, or both, in the State of	ſ <u> </u>	
	the corporation: THE SISTERS CLEANING SERVICES,	INC.	
2. The principal	office address: 2008 E. 114TH AVE TAMPA, FL 33612		
3. The mailing a	address (if different): SAME AS PRINCIPAL		
4. Date of incor	poration/qualification:JAN. 23, 2006 Document number:	P06000011288	
	d street address of the current registered agent and registered office on file vertment of State: (If resigned, enter resigned)	vith the	
	KRLO J. BARBERY, PRESIDENT		
	2008 E. 114TH AVE		
	TAMPA, FL 33612	<u> </u>	
6. The name an (if changed):	d street address of the new registered agent (if changed) and /or registered of		STORES A
	ASHLEY L. BARBERY, PRESIDENT	— <u> </u>	
	2008 E. 114TH AVE	### □	gamenaga Jamenaga Manana
	P.O. Box NOT acceptable TAMPA, FL 33612	3: 21	
The street addr as changed wil	ess of its registered office and the street address of the business office of l be identical.	its registered agent,	
Such change wanthorized by t	as authorized by resolution duly adopted by its board of directors or by a he board, or the corporation has been notified in writing of the change.	an officer so	
I hereby accept I further agree of my duties, an document is be	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 of am familiar with and accept the obligation of my position as registeing filed merely to reflect a change in the registered office address, I here is been notified in writing of this change.	omplete performance red agent. Or, if this	
Ushler	gnature of Registered Agent Date		
If signing on b	ehalf of an entity:		
	Typed or Printed Name		