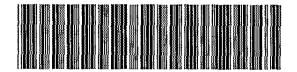
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(Re	equestor's Name)	
(Ac	ldress)	
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PICK-UP	☐ WAIT	MAIL
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## **COVER LETTER**

· ·		
TO: Amendment Section Division of Corporations		
SUBJECT: Acoma Therapy Spa Inc. /(Name of Corporation)		
DOCUMENT NUMBER: 1060000 70648		
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:		
(Name of Contact Person)  Law Office of Branda L-Xals  (Rirm/Company)		
3530 12t Avene North Sate 221 (Address)		
St. Petersbury, FL 33713 (City/State and Zip Code)		
For further information concerning this matter, please call:		
Boardon L. 26/6 Esa at (727 ) 25/-8363		

Enclosed is a \$35.00 check made payable to the Department of State.

(Name of Contact Person)

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

(Area Code & Daytime Telephone Number)

## 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: Acen the copy Spas, Inc.
2. The principal office address: 4012 W. Cotez RA S. 122106
Bridentey FL 34210
3. The mailing address (if different):
Date of incorporation/qualification: MAY 19, OS Document number: P360000 20648
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
Joseph Testa
4012 W. CONFOZ RD. 84. 2106
BRADENTO, FL. 34210 Fg 8
6. The name and street address of the new registered agent (if changed) and /or registered office 23 (if changed):
7530 15there noth Site 221 P.O. Box NOT acceptable)
St-Peterby, FL 33713
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 directory Zoil Printed or typed name and title)
Lhereby 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 Registered Agent) (Date)
If signing on behalf of an entity:
Timed or Drintad Nama)

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