(Re	equestor's Name)	·
(Ad	ldress)	· · · · · · · · · · · · · · · · · · ·
(Ad	ldress)	
(Cit	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to Filing Officer:		
		·

Office Use Only



700105087067

07/09/07--01015--029 \*\*35.00

## **COVER LETTER**

Division of Corporations
SUBJECT: Paces Cases Inc (Name of Corporation)
(Nume of Corporation)
DOCUMENT NUMBER: P 06 0000 77540
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:
Paul J. FRANCO (Name of Contact Person)
(Name of Contact Person)
(Firm/Company)
(Time Company)
3728 Olympia Drive
Hay by 74 74019
Hows for TX 77019 (City/State and Zip Code)
For further information concerning this matter, please call:
PAUL J. FRANCO at (7/3) 627-2273  (Name of Contact Person) (Area Code & Daytime Telephone Number)
(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

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: Paces Cases Inc
1. The name of the corporation: races cases inc  2. The principal office address: 12390 SW Elsinore Drive
Port St. Lucie, Fl 34987
3. The mailing address (if different):
4. Date of incorporation/qualification: June 5,206 Document number: PO600007754
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
Paul J. FRANCO FU ?
12390 SW Elcinore Drive FE E T
Post St. Lucie, FL 34987
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
6. The name and street address of the new registered agent (if changed) and for registered office (if changed):  FRANK FRANCO III
1032 SW Barbarosa Avenue
Port St. Lucse, FL 34953
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)  Paul J. Franco (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.
Franco F. 1 July 5, 2007
(Signature of Registered Agent) (Date)
If signing on behalf of an entity:
(Typed or Printed Name)

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