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SECRETARY OF STATE

COVER LETTER

Division of Corporations	
SUBJECT: Gear Inc	
(Name of	Corporation)
DOCUMENT NUMBER: P06000091630	
The enclosed Statement of Change of Registered Off	ice/Agent and fee are submitted for filing.
Please return all correspondence concerning this matt	ter to the following:
	g.
Grace Kraemer	
(Name of C	ontact Person)
Gear Inc	
(Firm/C	Company)
5845 Meadowpark Place	
(Ac	idress)
Lithia, FL 33547	
(City/State	and Zip Code)
For further information concerning this matter, please	e call:
Grace Kraemer	813 \ 601-4077
(Name of Contact Person)	at (813) 601-4077 (Area Code & Daytime Telephone Number)
Enclosed is a \$35.00 check made payable to the Depa	artment of State.
<u>Mailing Address:</u> Amendment Section	Street Address: Amendment Section
Division of Corporations	Division of Corporations
P.O. Box 6327	Clifton Building
Tallahassee, FL 32314	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 607.0302, 617.0302, 607.1308, or 617.1308, Florida Statutes, this ange is submitted for a corporation organized under the laws of the State of Florida er to change its registered office or registered agent, or both, in the State of Florida.
1. The name of t	the corporation: Gear, Inc.
2. The principal	office address: 13452 Boyette Road, Lithia, FL 33547
3. The mailing a	address (if different): 5845 Meadowpark Place 547
4. Date of incorp	poration/qualification: 7/10/06 Document number: P06000091630
	d street address of the current registered agent and registered office on file with the rtment of State:
	Grace Kraemer
	5845 Meadowpark Place
	Lithia, FL 33547
6. The name and (if changed):	Lithia, FL 33547 d street address of the new registered agent (if changed) and /or registered office HASSEL 23
	Grace Kraemer
	Grace Kraemer 14231 Powell Road (P.O. Box NOT acceptable)
	(P.O. Box NOT acceptable) Spring Hill, FL 34609
The street addre as changed will	ess of its registered office and the street address of the business office of its registered agent, be identical.
Such change wa authorized by th	as authorized by resolution duly adopted by its board of directors or by an officer so he board, or the corporation has been notified in writing of the change.
Grave (Signatu	Education Grace E. Kraemer/President (Printed or typed name and title)
I hereby accept I further agree t of my duties, an document is beil corperation has	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 complete performance ad I am familiar with and accept the obligation of my position as registered agent. Or, if this ing filed merely to reflect a change in the registered office address, I hereby confirm that the s been notified in writing of this change.
(frou	gnature of Registered Agent) 4/20/07 (Date)
If signing on be	half of an entity:
Crace	E. Kraemer

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