P06000092019

(Re	equestor's Name)	****
(Ac	ldress)	
(Ac	ldress)	
(Cit	ty/State/Zip/Phone	e #)
_	_	_
, PICK-UP	☐ WAIT	MAIL
· (Bu	ısiness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer	
-	T ming Gineer.	
•	•	
		

Office Use Only



300081284463

11/02/06--01030--013 **35.00

SECRETARY OF STATE
ALL AHASSEF, FLORIDA

N - O AMIII.

R.A. Charge

C. Coulliette NOV 0 3 2006



COVER LETTER

TO:	Amendment Section		
	Division of Corporations		

SUBJECT: Skyline Title Grown (Name of Corporation)
(Name of Corporation)
DOCUMENT NUMBER: P06 0 000 92019
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:
1 1 1 2 2 2

William DIAZ				
(Name of Contact Person)				
5 kyline Title Group (Firm/Company)				
(Firm/Company)				
3785 NW 82 Ave Svite 210				
(Address)				
Doral Fl 33/66				
(City/State and Zip Code)				

For further information concerning this matter, please call:

William Dia 7
(Name of Contact Person)

at (303) 759-5463
(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

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: 5K4/Int 1/the 27/047	
2. The principal office address: 3785 NW 82 Ave. # 210	
Nor41, FL 33166	
3. The mailing address (if different): 3785 NW 82 Ave #210	
100RA/ FL 33/66	7/1/
4. Date of incorporation/qualification: 07/200b Document number: p0600009	10/
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:	
911 NW 7 St	
DANIA FL 33 DOH	
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): 3785 NW 82 Ave # 210	F1L 2006 NOV -2
Drep 61 23166	ILED
(P.O. Box NOT acceptable)	X
The street address of its registered office and the street address of the business office of its registered as changed will be identical.	gent,
Such change val authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board of the corporation has been notified in writing of the change.	
(Signature of an Mice for director) (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 perfort of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, document is being field merely to reflect a change in the registered office address, I hereby confirm the corporation has been nowfield in writing of this change.	nance if this at the
11/1/06	
(Signature of Registered Agent)	
If signing on behalf of an entity:	
(Typed or Printed Name)	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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

CR2E045 (8/05)