

B6000/495/5

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

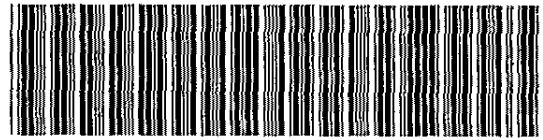
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RA Add. Change

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Historic Names Inc.
(Name of Corporation)

DOCUMENT NUMBER: P06000149515

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:

NiALL Sweeney
(Name of Contact Person)

Historic Names Inc
(Firm/Company)

1008 FLEMING STREET
(Address)

Key West FL 33040
(City/State and Zip Code)

For further information concerning this matter, please call:

NiALL Sweeney at (305) 923 7619
(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

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 _____ in order to change its registered office or registered agent, or both, in the State of Florida.

- 1. The name of the corporation: HISTORIC NAMES INC.
- 2. The principal office address: 210 INTRACOASTAL DRIVE
FT LAUDERDALE FL 33305
- 3. The mailing address (if different): 2132 NW 6TH AVE, WILTON MANORS
FL 33311
- 4. Date of incorporation/qualification: 12/1/06 Document number: P06000149515
- 5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

2132 NW 6TH AVE
WILTON MANORS
FL 33311

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- 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Niall Sweeney
1008 Fleming Street
(P.O. Box NOT acceptable)
Key West, FL 33040

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.

Niall Sweeney
(Signature of an officer or director)

NIALL SWEENEY
(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.

Niall Sweeney
(Signature of Registered Agent)

2/6/07
(Date)

If signing on behalf of an entity:

(Typed or Printed Name)

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