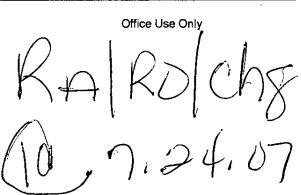
## P06000055151

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Document Number)		
Certified Copies	_ Certificates	of Status
Special Instructions to Filing Officer:		
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## **COVER LETTER**

TO: Amenda Division	nent Section of Corporations	
SUBJECT:	Families First Van (Name of Corp	
DOCUMENT I	NUMBER: P06000155751	
	atement of Change of Registered Office/A	gent and fee are submitted for filing.
Please return all	correspondence concerning this matter to	the following:
	Glenn Shelle	v
	(Name of Contact	
	Families First Van Li (Firm/Comp	ines, Inc.
	113 Hollywood Bi (Address	
*** · · · · · · · · · · · · · · · · · ·	Fort Walton Beach, F	
For further infor	rmation concerning this matter, please call	· · · · · · · · · · · · · · · · · · ·
Jenny Pappa	Name of Contact Person)	at ( 850 ) 244-7661 (Area Code & Daytime Telephone Number)
Enclosed is a \$3	5.00 check made payable to the Departme	ent 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: Families First Van Lines, Inc.
2. The principal office address: 113 Hollywood Blvd. NW Fort Walton Beach, FL 32548
3. The mailing address (if different): Post Office Box 2317 Fort Walton Beach, FL 32549
4. Date of incorporation/qualification: 12/27/06 Document number: P06000155751
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
William S. Foster
909 Mar Walt Drive #1014
Fort Walton Beach, FL 32547
909 Mar Walt Drive #1014  Fort Walton Beach, FL 32547  6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):  Glenn Shelley
Glenn Shelley ?: L
113 Hollywood Bivd. NVV
(P.O. Box NOT acceptable) Fort Walton Beach, FL 32548
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 of director)  Glenn Shelley, President (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.
7/17/07
(Signature of Registered Agent) (Date)
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 \* \* \*