## P07000022601

,			
(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
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SECRETARY OF STATE
ALLAHASSEF FIRE

Jana -

## **COVER LETTER**

Amendment Section Division of Corporations

TO:

	DECOLUTIONS SENTER SOR	TODATION.	
SUBJECT:	UBJECT: RESOLUTIONS CENTER CORPORATION (Name of Corporation)		
DOCUMENT	NUMBER: P07000022601		
The enclosed S	Statement of Change of Registered Office/A	agent and fee are submitted for filing.	
Please return a	all correspondence concerning this matter to	the following:	
	PARRISH MATEO		
	(Name of Conta	ct Person)	
RESOLUTIONS CENTER CORPORATION (Firm/Company)			
	(Finis Cont	pany)	
	1060 WEST SR 434, SUITE 156		
	(Addres	s)	
	LONGWOOD, FL 32750		
	(City/State and	Zip Code)	
For further info	formation concerning this matter, please cal	1:	
PARRISH MA	ATEO	at (888 ) 879-7001 (Area Code & Daytime Telephone Number)	
	(Name of Contact Person)	(Area Code & Daytime Telephone Number)	
Enclosed is a S	\$35.00 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

statement of cha	nge is submitted for a corporation	7.0502, 607.1508, or 617.1508, Florida Statutes, this organized under the laws of the State of Florida		
		registered agent, or both, in the State of Florida.		
	he corporation: RESOLUTIONS C			
	office address: 1060 WEST SR 43 D, FL 32750	4, SUITE 156		
3. The mailing a	ddress (if different): SAME AS AE	BOVE .		
4. Date of incorp	poration/qualification: 02/19/2007	Document number: P07000022601		
	I street address of the current regist tment of State:	ered agent and registered office on file with the		
	GARCIA, FRANK	- · · · · · · · · · · · · · · · · · · ·		
	1361 EAST OSCEOLA PA	ARKWAY, SUITE 314 ≥ 0		
	KISSIMMEE, FL 34744	d agent (if changed) and (or registered off) ARY		
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):				
	PARRISH MATEO	STAI COR		
	1060 WEST SR 434, SUIT	$\sim$ $\sim$ $\sim$ $\sim$ $\sim$		
	(P.O. Box NOT ac	ceptable)		
	LONGWOOD, FL 32750			
		street address of the business office of its registered agent,		
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.				
(Signat	ire of an officer or director)	Luis Candelaria (Printed or typed name and title)		
I hereby accept I further agree of my duties, ar document is be copporation ha	the appointment as registered ag to comply with the provisions of a id I am familiar with and accept t ing filed merely to reflect a chang s been notified in writing of this c	rent and agree to act in this capacity. Ill statutes relative to the proper and complete performance he obligation of my position as registered agent. Or, if this re in the registered office address, I hereby confirm that the hange.		
Harrist	gnature of Registered Agent)	03/26/2007 (Date)		
9	chalf of an entity:			
Parrish Mateo				
(Typed or Printed Name)				

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