(Requestor's Name)			
(Address)	20011145		
(Address)	20011110		
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)	11/01/0701017-		
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:	S M		
Office Use Only	1/X 1) 'NH		



5452

'--019 **35.00

COVER LETTER

TO:	Amendment Section Division of Corporations				
SUBJI	ECT: Vanguelov Inc. (Name of Corpor	ration)			
DOCUMENT NUMBER: P07000036030					
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.					
Please	return all correspondence concerning this matter to th	e following:			
	Brian Vanguelov (Name of Contact)				
	(Name or Contact	Person)			
Vanguelov Inc. (Firm/Company)					
9934 ASHBURN LAKE DR (Address)					
TAMPA, FL 33610 (City/State and Zip Code)					
For further information concerning this matter, please call:					
Brian	(Name of Contact Person) at	(727) 439-3027 (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

statement of change is subn	sitted for a corporation organiz	, 607.1508, or 617.1508, Florida S zed under the laws of the State of _ red agent, or both, in the State of F	Florida
1. The name of the corporat	ion: Vanguelov Inc.		
	ess: 9934 ASHBURN LAKE	DR, Tamp, FL 33610	
3. The mailing address (if d	ifferent):		
4. Date of incorporation/qua	alification: 03/21/2007	Document number: P07000	036030
5. The name and street addr Florida Department of St		ent and registered office on file wit	th the
Jan Ko	dov		
- 2690 D	REW ST. #417		_
CLEAR	WATER FL 33759		200 SE TAL
.6. The name and street addr (if changed):	ess of the new registered agent	(if changed) and /or registered off	Z001NOV -1 SECRETARY
Brian V	'anguelov		PA PA
9934 A	SHBURN LAKE DR	and the second s	_85 =
TAMPA	(P.O. Box NOT acceptable) A, FL-33610		ZZ IDA
The street address of its reas changed will be identicated	gistered office and the street a	ddress of the business office of it	s registered agent,
		by its board of directors or by an ified in writing of the change.	
(Signature of an office)	Cordunator)	Brian Vanguelov (Printed or typed name and t	tifle)
I hereby accept the appoin	tment as registered agent and	• • • • • • • • • • • • • • • • • • • •	•
55 m/s/		10/29/2007	
(Signature of Reki	<u> </u>	(Date)	
(Typed or Printed	·Name)		

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