D0700037248

(Requestor's Name)	•	
(Address)	-	
. (Address)	-	
(City/State/Zip/Phone #)	-	
PICK-UP WAIT MAIL		
. (Business Entity Name)	-	
(Document Number)	-	
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:	1	
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Office Use Only



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SECRETARY OF STATE
TALLAHASSEE, FI ORION

PASS (

COVER LETTER

TO: Amend Divisio	ment Section n of Corporations			
SUBJECT:	Fresh Air Consulting In	c		
"	(Name of Cor	poration)		
DOCUMENT	NUMBER: P07000037248			
The enclosed St	atement of Change of Registered Office/A	Agent and fee are submitted for filing.		
Please return al	correspondence concerning this matter to	the following:		
	Leona Grable			
	(Name of Conta	ct Person)		
•				
	Fresh Air Consulting			
	(Firm/Com	pany)		
•	P O Box 2201 (Addres	(2)		
	•	,		
Titusville,FL 32781				
	(City/State and	Zip Code)		
For further info	rmation concerning this matter, please call	l :		
Leona	Name of Contact Person)	at (321) 264-0489 (Area Code & Daytime Telephone Number)		
		(.		
Enclosed is a \$3	5.00 check made payable to the Departme	ent of State.		
	Mailing Address: Amendment Section	Street Address: Amendment Section		
	Division of Corporations	Division of Corporations		
	P.O. Box 6327	Clifton Building		
	Tallahassee, FL 32314	2661 Executive Center Circle		
		Tallahassee, FL 32301		

TO:

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: Fresh Air Consulting INC
2. The principal office address: 3562 Muirfield Drive, Titusville, FL 32780
3. The mailing address (if different): P O Box 2201, Titusville, FL 32781
4. Date of incorporation/qualification: 03/23/2007 Document number: P07000037248
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
Steve_Grable
3562 Muirfield Drive
Titusville, FL 32780
6. The name and street address of the new registered agent (if changed) and /or registered officer (if changed):
3562 Muirfield Drive (P.O. Box NOT acceptable)
Titusville, FL 32780
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.
Street Julie President Director (Signature of all officer or director) President / 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 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.
Secret Hable 6-01-07 (Signature of Registered Agent) (Date)
(Signature of Registered Agent) (Date)
If signing on behalf of an entity:
(Typed or Printed Name)
* * * FILING FEE: \$35.00 * * *

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (8/05)