| (Red                                    | questor's Name)   |           |  |
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## **COVER LETTER**

| TO: Amendment Section Division of Corporations                       |  |  |  |  |
|--|--|--|--|--|
|  |  |  |  |  |
| SUBJECT: CHEEKY MONKEY CLEANING SERVICE, INC.                        |  |  |  |  |
| (Name of Corporat  | ion)   |  |  |  |
| DOCUMENT NUMBER: P07000109206  |  |  |  |  |
| The enclosed Statement of Change of Registered Office/Agen           | t and fee are submitted for filing.                |  |  |  |
| Please return all correspondence concerning this matter to the       | following:   |  |  |  |
|  |  |  |  |  |
| JOSEPHINE FULLER   |  |  |  |  |
| (Name of Contact Pe  | erson)   |  |  |  |
|  |  |  |  |  |
| CHEEKY MONKEY CLEANING SERVICE, INC (Firm/Company)                   |  |  |  |  |
| (, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,                               | ,  |  |  |  |
| 19220 WEST LAKE DRIVE  |  |  |  |  |
| (Address)  |  |  |  |  |
|  |  |  |  |  |
| HIALEAH, FLORIDA 33015   |  |  |  |  |
| (City/State and Zip Code)  |  |  |  |  |
| For further information concerning this matter, please call:         |  |  |  |  |
| JOSEPHINE FULLER at (  | 305 ) 829-8540                                     |  |  |  |
| (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                                   | 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 |  |  |  |
|  | Tananassee, FL 32301                               |  |  |  |

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

| statement of cha   | nge is submitted for a corporation org                                       | 9502, 607.1508, or 617.1508, Florida St<br>ganized under the laws of the State of <u>F</u><br>sistered agent, or both, in the State of Flo | LORIDA                           |         |
|--|--|--|----------------------------------|---------|
| 1. The name of   | he corporation: CHEEKY MONKEY C  | CLEANING SERVICE, INC.   |                                  |         |
| 2. The principal   | office address: 19220 WEST LAKE D  | RIVE HIALEAH, FLORIDA 33015  |                                  |         |
| 3. The mailing a   | ddress (if different):   |  |                                  |         |
| 4. Date of incorp  | poration/qualification: 10/02/2007   | Document number: P0700010  | 09206                            |         |
|  | street address of the current registered tment of State:                     | d agent and registered office on file with   | ı the                            |         |
|  | JOSEPHINE FULLER   |  |                                  |         |
|  | 18520 NW 67TH AVENUE # 354   |  |                                  |         |
|  | MIAMI, FLORIDA 33015   |  | ZOUR .<br>SEC                    | re Pari |
| 6. The name and (if changed):  | street address of the new registered a                                       | gent (if changed) and /or registered offic   | 2008 JUN 17 SECRETARY TALLAHASSE |         |
|  | 19220 WEST LAKE DRIVE  |  | mo B                             | (       |
|  | HIALEAH, FLORIDA 33015   |  | 9: 2!<br>STATI                   |         |
|  | (P.O. Box NOT accepta  | ible)  | DH CO                            |         |
| The street addre   | ss of its registered office and the stre<br>be identical.                    | eet address of the business office of its  | registered agent,                |         |
| Such change wa<br>authorized by th   | s authorized by resolution duly adop<br>e board, or the corporation has been | oted by its board of directors or by an one notified in writing of the change.   | officer so                       |         |
| A-MA   | re of an officer or director)  | JOSEPHINE FULLER, PRESI  | DENT                             |         |
| hereby accept<br>I further agree to<br>of produties, an<br>document is bei | the appointment as remistered agent  | latules relative to the proper and comp<br>obligation of my position as registered<br>the registered office address. Thereby               | ,                                |         |
| AN   | hu   | JUNE 09, 2008  |                                  |         |
|  | nature of Registered Agent)<br>/<br>nalf of an entity:                       | (Date)   |                                  |         |
| . Signing on be  |  |  |                                  |         |
| (T   | vped or Printed Name)  |  |                                  |         |

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