## P07000115753

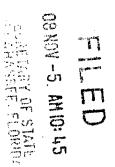
(Requestor's Name)
(4.11
(Address)
(Address)
(1000)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
(Document Hamber)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





800137171548

10/24/08--01018--022 \*\*35.00



Ending.

## **COVER LETTER**

TO: Amendment Section Division of Corporations
SUBJECT: Blessed 2 B Ame Inc. (Name of Corporation)
DOCUMENT NUMBER: 207000115753
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
(Name of Contact Person)
Blessed 2 B Home Inc.
2881 Strad Circle (Address)
Oviedo Fi 32765
(City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Contact Person) at (407) 971-4570 (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

SECRETARY OF STATE
TO THE CHARACTER OF STATE

TO THE CHARACTER OF STATE

TO THE CHARACTER OF STATE

TO THE CHARACTER OF STATE

TO THE CHARACTER OF STATE

TO THE CHARACTER OF STATE

TO THE CHARACTER OF STATE

TO THE CHARACTER OF STATE

TO THE CHARACTER OF STATE

TO THE CHARACTER OF STATE

TO THE CHARACTER OF STATE

TO THE CHARACTER OF STATE

TO THE CHARACTER OF STATE

TO THE CHARACTER OF STATE

TO THE CHARACTER OF STATE

TO THE CHARACTER OF STATE

TO THE CHARACTER OF STATE

TO THE CHARACTER OF STATE

TO THE CHARACTER OF STATE

TO THE CHARACTER OF STATE

TO THE CHARACTER OF STATE

TO THE CHARACTER OF STATE

TO THE CHARACTER OF STATE

TO THE CHARACTER OF STATE

TO THE CHARACTER OF STATE

TO THE CHARACTER OF STATE

TO THE CHARACTER OF STATE

TO THE CHARACTER OF STATE

TO THE CHARACTER OF STATE

TO THE CHARACTER OF STATE

TO THE CHARACTER OF STATE

TO THE CHARACTER OF STATE

TO THE CHARACTER OF STATE

TO THE CHARACTER OF STATE

TO THE CHARACTER OF STATE

TO THE CHARACTER OF STATE

TO THE CHARACTER OF STATE

TO THE CHARACTER OF STATE

TO THE CHARACTER OF STATE

TO THE CHARACTER OF STATE

TO THE CHARACTER OF STATE

TO THE CHARACTER OF STATE

TO THE CHARACTER OF STATE

TO THE CHARACTER OF STATE

TO THE CHARACTER OF STATE

TO THE CHARACTER OF STATE

TO THE CHARACTER OF STATE

TO THE CHARACTER OF STATE

TO THE CHARACTER OF STATE

TO THE CHARACTER OF STATE

TO THE CHARACTER OF STATE

TO THE CHARACTER OF STATE

TO THE CHARACTER OF STATE

TO THE CHARACTER OF STATE

TO THE CHARACTER OF STATE

TO THE CHARACTER OF STATE

TO THE CHARACTER OF STATE

TO THE CHARACTER OF STATE

TO THE CHARACTER OF STATE

TO THE CHARACTER OF STATE

TO THE CHARACTER OF STATE

TO THE CHARACTER OF STATE

TO THE CHARACTER OF STATE

TO THE CHARACTER OF STATE

TO THE CHARACTER OF STATE

TO THE CHARACTER OF STATE

TO THE CHARACTER OF STATE

TO THE CHARACTER OF STATE

TO THE CHARACTER OF STATE

TO THE CHARACTER OF STATE

TO THE CHARACTER OF STATE

TO THE CHARACTER OF STATE

TO THE CHARACTER OF STATE

TO THE CHARACTER OF STATE

TO THE CHARACTER OF STATE

TO

2003 NA 2- YON 6002

MEGENTAL



October 29, 2008

DEBBIE BOHLMANN 2881 STRAND CIRCLE OVIEDO, FL 32765

SUBJECT: BLESSED 2 B HOME, INC.

Ref. Number: P07000115753

We have received your document for BLESSED 2 B HOME, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The application/form submitted does not meet the requirements of this office; please complete the attached application/form.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6916.

Letter Number: 908A00055524

Carol Mustain Regulatory Specialist II

## 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 Florids.
$\mathcal{D}I + \mathcal{D}\mathcal{D}I + \mathcal{D}\mathcal{D}I$
1. The name of the corporation: Blessed 2 B How Inc.
2. The principal office address: 2881 Strand Circle
Oviedo F2 32765
3. The mailing address (if different):
4. Date of incorporation/qualification: OCF 22 250 Document number: P07000115753
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)
Corpration Service Company &
12.1 Hays Street Empany
Tallahassee Fr 32301
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Debbie Bohlmann
2881 Strand Circle
(P.O. Box NOT acceptable)
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 or director)  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.
Signature of Registered Agent)  11/3/08 (Date)
If signing on behalf of an entity:
alkfjsaldkfj (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)