P0700134817

(Requestor's Name)		
(Address)		
(Address)		
(,		
(0) (0) (7) (0)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
,		
Contilled Copies Contillector of Status		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		

Office Use Only



700314034087

06/04/18--01012--009 **35.00

JUN 05 2018 S. YOUNG FILED

18 JUN -4 PH 3: 51

SLOKETARY OF STATE
JALLAHASSEE, FLORIDA

COVER LETTER

SUBJECT: ARJER COED. Nime of Con	
Name of Con	poration
DOCUMENT NUMBER: POTODO	1348 17
The enclosed Statement of Change of Registered Office/a	Agent and fee are submitted for filing.
Please return all correspondence concerning this matter to	
GERAUD H. A.1 Name of Conta	OELSO W
ARJER C	or p.
7915 BRID/in	
	ach fl. 33472 Zip Code
GERAW A1 C	
E-mail address: (to be used for futu	ure annual report notification)
For further information concerning this matter, please cal	II:
6 Chave adelsow Name of Contact Person	at (561) 389-4201
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a \$35.00 check made payable to the Departm	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: Amendment Section Division of Corporations

* * 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 Fla .
in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: ARSER CORP.
2. The principal office address: 7915 Bridlingfu br
Boynton Beach F1 334 32
3. The mailing address (if different):
4. Date of incorporation/qualification: 1/1/08 Document number: Po 7000 13481
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)
Lori Adelson Esq., P.A.
200 East browner Blud # 1500, Ft lander dur, EC 33301
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
GERAND ADECSON ET
P.O. Box NOT acceptable
Boyntu Beach
The street address of its registered office and the street address of the business office of its egistered 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 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 Date
If signing on behalf of an entity:
Gerald adelson

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

Typed or Printed Name