

P080000000456

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

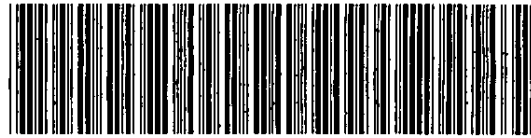
(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100132006791

07/03/08--01020--015 **35.00

FILED
08 JUL 18 PM 3:47
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PA Change
07-22-08
DC

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Raw Power Yoga INC
(Name of Corporation)

DOCUMENT NUMBER: P08000000 456

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:

Alison Dadow
(Name of Contact Person)

Raw Power Yoga
(Firm/Company)

4550 Donald Ross Rd Suite 106
(Address)

Palm Beach Gardens FL 33418
(City/State and Zip Code)

For further information concerning this matter, please call:

Alison Dadow at (561) 5688696
(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
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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 10, 2008

AW Darlene

ALISON DADOW
4550 DONALD ROSS ROAD
SUITE 106
PALM BEACH GARDENS, FL 33418

SUBJECT: RAW POWER YOGA, INC
Ref. Number: P08000000456

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

WE ARE ENCLOSING A PRINTOUT OF THE CURRENT INFORMATION ON RECORD FOR YOUR CORPORATION. PLEASE VERIFY THE INFORMATION AND GIVE US A CALL CONCERNING THIS MATTER.

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) 245-6906.

Darlene Connell
Regulatory Specialist II

Letter Number: 008A00040638

RECEIVED
2008 JUL 18 AM 8:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**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 FL in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Raw Power Yoga, Inc
2. The principal office address: 4550 Donald Ross Rd suite 106
Palm Beach Gardens FL 33418
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 1/2/08 Document number: P08000000456

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: Cliffon Goodwell

018 US Hwy 1 Suite 201
North Palm Beach FL 33408

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Alison Dadow
4550 Donald Ross Rd #106
(P.O. Box NOT acceptable)
Palm Beach Gardens FL 33418

FILED
08 JUL 18 PM 3:47
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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)

Alison Dadow
(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)

6/30/08 7/15/08
(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)