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SECRETARY OF STATE
MALLAHASSET FLORID

R-A. Chong

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APR 09 2010

EXAMINER

COVER LETTER

DOCUMENT NUMBER: 10800036849			
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:			
SCOTT ESTER Name of Contact Person			
LESTER SERVICES, INC.			
740 NE 47 ST Address			
OAKLAND PARK, FL 33334 City/State and Zip Code			
E-mail address: (to be used for future annual report notification)			
For further information concerning this matter, please call: SCOTT LESTER at 239, 628-689 Name of Contact Person Area Code & Daytime Telephone Number			
The Code & Day time Telephone National			

Street Address: Amendment Section

Clifton Building

Division of Corporations

2661 Executive Center Circle Tallahassee, FL 32301

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address: Amendment Section

P.O. Box 6327

Division of Corporations

Tallahassee, FL 32314

CR2E045 (8/05)

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 Florida. in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: LESTER SERVICES, INC. 2. The principal office address: 109 NE 17 TERR, FORT 440ERDALE FL 37304
3. The mailing address (if different):
4. Date of incorporation/qualification: 04 10 08 Document number: POPOOO36849
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) 740 NE 47 ST, OAKLAND AGENT: SCOTT LESTER 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): 99 NE 17 TORRACE P.O. Box NOT acceptable
AGENT: SOTT LESTER 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 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
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 If signing on behalf of an entity:
Typed or Printed Name

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