## P0800004/008

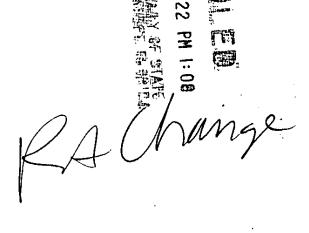
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## COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: DANA JUAY PASTA LNC Name of Corporation
DOCUMENT NUMBER: P 08 0000 4/008
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:
LAWRENCE L AMATERS.  Name of Contact Person
Name of Contact Person
CON- Am CONSULTING SERVICES INC
66 Brooklyn LANK Address
PALM CoAst FL 32137  City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:  LAURENCE L AMATURE at (516 ) 4045327  Name of Contact Person Area Code & Daytime Telephone Number
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

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

1. The name of the corporation:  DANICAL PAIN TOCAL  2. The principal office address:  GG BRONKLY V LOLE  PAIN COAST FL 32.137  3. The mailing address (if different):  4. Date of incorporation/qualification:  4/23/08 Document number:  POBOGO 41008  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)  Amathas Lawaruck F  GG BRONLLY LONE  PAIN COAST FL 32.137  6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):  BOYLE DANA  SIGNATOR COAST FL 32.137  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.  Concerns Amathas State  Large Variables and Markey State  Concerns Amathas State  Large Variables and Markey State  Large Variables and Markey State  Large Variables and Markey State  Concerns Amathas State  Large Variables and Markey Concerns the approximation are registered agent and cover to get the fire companies.	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 Local in order to change its registered office or registered agent, or both, in the State of Florida.
2. The principal office address:    Compared   Park   Park	^ -
3. The mailing address (if different):  4. Date of incorporation/qualification:  4/23/08  Document number:  6. Decomposition of State: (If resigned, enter resigned)  Amathas  Canst fl 32/37  6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):  Boylk DAMA  5.1 Bread Brook 5.08 LAR  PO. Box NOT acceptable  Road Grast fl 32/37  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.  Amathas State of the appointment as registered agent and agree to act in this capacity. In this capacity of the provisions of all statutes relative to the proper and complete performance of my duttes, and 1 am familiar with and accept the obligation of my position as registered agent. Or, if this corporation has been notified in writing of these address. Thereby confirm that the corporation has been notified in writing of this change.  Printed or typed name and only the proper and complete performance of my duttes, and 1 am familiar with and accept the obligation of my position as registered agent. Or, if this corporation has been notified in writing of this change.  Signature of Registered Agent  Parties of Registered Agent  Parties of Registered Agent  Printed or typed name and this the provision has been notified in writing of this change.	
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)  Amathas Lawling f  6. Grootly Lawk  Palm Coast fl 32137  6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):  Boyla Dawa  5.1 Brootly 1.00 Dawa  Fo. Box NOT acceptable  Po. Box NOT acceptable  Post of 32137  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.  Description of the day of the day of the day of the change 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, Thereby confirm that the corporation has been notified in writing of this change.  Signature of Registered Agent  Date	le l
Florida Department of State: (If resigned, enter resigned)  Amathas Lawrer f  6. Brootly Lora  Palm Const fl 32/37  6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):  Boyla Dama  SI Dama Brootles, or Lare  Po. Box NOT acceptable  Po. Box NOT acceptable  Po. Box NOT acceptable  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.  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.  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.  Such change was authorized by resolution 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	4. Date of incorporation/qualification: 4/13/08 Document number: P080000 41008
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):  Boyla DANA  Signature of Registered Agent  Brookly to have part of the corporation has been notified in writing of this change.  Brookly to have proper and complete performance of my duties, and I am familiar with and accept the obligation of my position has been notified in writing of the comporation has been notified and registered agent. Or, if this document is being filed merely to reflect a change in the registered office address. Thereby confirm that the corporation has been notified in writing of the change.  Signature of Registered Agent  Date	
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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.  Concern Amana Stery  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.  Date  Date	(if changed):
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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.  Corchital Amage.  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.  Date  Date	P.O. Box NOT acceptable
Signature of we bridge of director of 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  Corchard Amage in this capacity.  Printed or typed name and title	The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.
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  Printed or typed name and title	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.
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If signing on behalf of an entity:	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.
Typed or Printed Name	

Make checks payable to Florida Department of State
Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

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