## U80000144695

(Red	questor's Name)	
(Add	dress)	
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PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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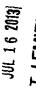
Office Use Only



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## **COVER LETTER**

TO: Amendment Section Division of Corporations

THE AL-HOUDA INC

Name of Corporation

DOCUMENT NUMBER P08000044695

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:

SAM SALEM

Name of Contact Person

Firm/Company

4651 BABCOCK ST NE STE 10

Address

PALM BAY FL 32905

City/State and Zip Code

wahab@mytaxcorp.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

SAM SALEM

<sub>.</sub>321 \557-3554

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

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: AL-HOUDA INC	
2. The principal office address: 4651 BABCOCK ST NE STE 10	-
PALM BAY FL 32905	
3. The mailing address (if different):	_
4. Date of incorporation/qualification: 06/19/209 Document number: P08000044695	_
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)	
SHAEMAH JOUMAH	
4651 BABCOCK ST NE STE 10	
PALM BAY FL 32905	
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):	•
SAM SALEM PO	<u> </u>
4651 BABCOCK ST NE STE 10	
P.O. Box NOT acceptable	
PALM BAY FL 32905	
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, of the corporation has been notified in writing of the change.	
SAM SALEM (OFFICER)  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:	
SAM SALEM	
Typed or Printed Name	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (03/12)

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

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