## P08000092904

(Requestor's Name)
(Address)
(Address)
,
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
` .
(Decument Number)
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8/16/10

## **COVER LETTER**

TO: Amendment Section Division of Corporations		
SUBJECT: ARBENTERP  Name of C		
DOCUMENT NUMBER: P08	000092904	
The enclosed Statement of Change of Registered Office	e/Agent and fee are submitted for filing.	
Please return all correspondence concerning this matter	· ·	
and many	to the tellering.	
	M LOPEZ	
Name of Co	ntact Person	
A R B ENTER		
Firm/Co	ompany	
1105 S. MIL	ITARY TRL.	
Add	ress	
DEERFIELD BE	ACH, FL 33442	
City/State ar	nd Zip Code	
ccasapava@	gtatax.com	
E-mail address: (to be used for fi	uture annual report notification)	
For further information concerning this matter, please of	call:	
ABRAHAM LOPEZ	at ( 954 ) 861-8801 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:	Street Address:	
Amendment Section Division of Corporations	Amendment Section Division of Corporations	
P.O. Box 6327	Clifton Building	
Tallahassee FI 32314	2661 Executive Center Circle	

Tallahassee, FL 32301

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statinger is submitted for a corporation organized under the laws of the State of $\overline{FLC}$ represents to change its registered office or registered agent, or both, in the State of Florical registered agent.	ORIDA		
1. The name of t	he corporation: A R B ENTERPRISES INC			
	office address: 1105 S. MILITARY TRL. DEERFIELD BEACH FL 3	3442 US	<u> </u>	
3. The mailing a	ddress (if different): SAME			_
4. Date of incorp	oration/qualification: 10/10/2008 Document number: P08	0000929	904	_
	street address of the current registered agent and registered office on file with the transfer of State: (If resigned, enter resigned)	ne		
	ABRAHAM LOPEZ			
	3658 NE 18TH TERRACE	SEC	2010	
	POMPANO BEACH FL 33064 US	AET/	2010 AUG	Ţ
6. The name and (if changed):	street address of the new registered agent (if changed) and /or registered office	RETARY OF S	ت آ آ	
	ABRAHAM LOPEZ	ORI	MH H: 02	-31
	1105 S. MILITARY TRL.  P.O. Box NOT acceptable		~	
	DEERFIELD BEACH FL 33442 US			
The street addre as changed will	ss of its registered office and the street address of the business office of its rebe identical.	gistered a	gent,	
Such change wa authorized by th	is authorized by resolution duly adopted by its board of directors or by an office board, or the corporation has been notified in writing of the change.	icer so		
	ABRAHAM LOPEZ, PRE: Printed or typed name and title			
I hereby accept I further agree t of my duties, an document is beil corporation has	the appointment as registered agent and agree to act in this capacity ocomply with the provisions of all statutes relative to the proper and comple d I am familiar with and accept the obligation of my position as registered a fight merely to reflect a change in the registered office address, I hereby been notified in writing of this change.	ete perform gent. Or, confirm the	nance if this at the	
Sigr	About 08/10/2010  Date  Date		_	
	half of an entity:			
	PRAHAM LOPEZ  //ped or Printed Name			

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