P08000103471

(Re	equestor's Name)			
(Ad	idress)			
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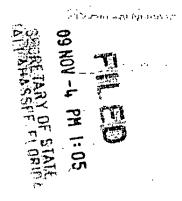
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COVER LETTER

TO: Amendmer Division of	nt Section f Corporations	,			
SUBJECT:	Barbara Grets				
	Name of Corp	poration			
DOCUMENT NU	MBER:	0103471			
The enclosed States	ment of Change of Registered Office/A	Agent and fee are submitted for filing.			
Please return all co	rrespondence concerning this matter to	the following:			
		, and tene wing.			
Barbara Gretsch					
•	Name of Conta	ct Person			
	Barbara Gretsch Inc				
	Firm/Com	pany			
	•				
	1451 South Miam				
	Addres	S			
	Miami, FI 3 City/State and 3	33130 7:- Codo			
	City/State and	Zip Code			
	barbaragretsch@	gmail.com			
	E-mail address: (to be used for futu	ure annual report notification)			
For further informa	tion concerning this matter, please call	l:			
	Barbara Gretsch	at (773) 208-2992			
Nan	ne of Contact Person	Area Code & Daytime Telephone Number			
Enclosed is a \$35.0	00 check made payable to the Departme	ent of State.			
	Mailing Address: Amendment Section	Street Address: Amendment Section			
	Amendment Section Division of Corporations				
	Division of Corporations	Division of Corporations			

Clifton Building

Tallahassee, FL 32301

2661 Executive Center Circle

P.O. Box 6327

Tallahassee, FL 32314

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

Pursuant to the provisions of secti statement of change is submitted f in order to change its res	or a corporation organize	·	_{e of} Florida	nis
1. The name of the corporation:		Ü	. o, 1 . o	•
2. The principal office address: 14			33130	
3. The mailing address (if differen	t):			<u> </u>
4. Date of incorporation/qualificat	ion: Jan 1, 2009	Document number:	P080001	03471
5. The name and street address of Florida Department of State: (If		nt and registered office on fi	le with the	
Barbara Gret	sch			
1200 BRICI	KELL AVENUE, S	TE. 1220		
MIAMI, FL	. 33131			
6. The name and street address of (if changed):	the new registered agent (if changed) and /or registere	ed office	8 Nov
Barbara Gret	sch		SSEE.	
1451 South N	/liami Ave, Apt 601		יע	¥ (1)
Miami, FI 331	P.O. Box NOT ac	eceptable	5≯ (
The street address of its registere as changed will be identical.	ed office and the street ad	dress of the business office	e of its register	ed agent,
Such change was authorized by authorized by the board, or the c	resolution duly adopted borporation has been notif	y its board of directors or lied in writing of the chang	by an officer so	0
Signature of an other or direct	or	Barbara G	efsch e and title	
I hereby accept the appointment I further agree to comply with th of my duties, and I am familiar w document is being filed merely to corporation has been notified in	e provisions of all statute with and accept the obliga o reflect a change in the r	s relative to the proper an	d complete per	formance Or, if this n that the
MM		Nov 1, 2	2009	·
Signature of Registered Ag If signing on behalf of an entity:	gent	Date		
organize on contain or an entity.				· .
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 * * *