P0900008563

(Requestor's Name)
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(Address)
(Address)
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,
(City/State/Zip/Phone #)
•
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<u> </u>
(Business Entity Name)
(Danissant Niverban)
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COVER LETTER

Amendment Section Division of Corporations

TO:

SUBJECT: wunderlin and associates. (Name	of Corporation)
DOCUMENT NUMBER: p09000008563	
The enclosed Statement of Change of Registered C	Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this m	natter to the following:
ama (Name o	nda wunderlin f Contact Person)
wunderlin (Fire	and associates, inc
5237 sumr	merlin commons blvd Address)
ft / (City/Sia	myers fl 33907 tte and Zip Code)
For further information concerning this matter, ple	ase call:
amanda wunderlin (Name of Contact Person)	at (239) 2260800 (Area Code & Daytime Telephone Number)
Enclosed is a \$35.00 check made payable to the De	epartment of State.
Mailing Address: Amendment Section Division of Corporation P.O. Box 6327 Tallahassee, FL 32314	Street Address: Amendment Section s 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

statement of ch	e provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statu ange is submitted for a corporation organized under the laws of the State of <u>flori</u> er to change its registered office or registered agent, or both, in the State of Floric	da		
1. The name of	the corporation: wunderlin and associates, inc			
2. The principa	office address: 5237 summerlin commons blvd, ft myers fl 33907			
3. The mailing	address (if different):		*	
4. Date of incom	poration/qualification: 1/27/2008 Document number: p09000008	3563		
	d street address of the current registered agent and registered office on file with the rtment of State: (If resigned, enter resigned)	e		
	peter look	SECR	09 FI	
	2125 santa barbara blvd	HASS	<u>-8</u>	E
	cape coral fl 33991		PH	-ED
6. The name an (if changed):	d street address of the new registered agent (if changed) and /or registered office	ORIDA	1:54	
	amanda wunderlin			
	5237 summerlin commons blvd (P.O. Box NOT acceptable)			
	ft myers fl 33907			
The street address changed will	ess of its registered office and the street address of the business office of its registered.	gistered a	gent,	
Such change w authorized by t	as authorized by resolution duly adopted by its board of directors or by an office board, or the comporation has been notified in writing of the change.	cer so	1	0
Anald	ure of an officer or director) Manual Wind (Printed or typed name and title)	fer /	<u>N</u>	1105
I hereby accept I further agree of my duties, ar document is be corporation ha	the appointment as registered agent and agree to act in this capacity. to comply with the provisions of all statutes relative to the proper and complet ad I am familiar with and accept the obligation of my position as registered ag- ing filed merely to reflect a change in the registered office address, I hereby co s been notified in writing of this change.			1
Smark	a Ululi 1-29-09	·		
	gnature of Registered Agent) (Date) Phalf of an entity:			
(*	Typed or Printed Name)			

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