P0900035308

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то:	Amendmer Division of	nt Section Corporations			
SUBJI	ECT:	Thomas L. So	ota, Inc		
DOCU	JMENT NU	mber: <u>7090000353</u> 0	<u> </u>		
The en	closed States	ment of Change of Registered Office/	Agent and fee are submitted for filing.		
Please	return all co	rrespondence concerning this matter t	o the following:		
		Tom S Name of Cont	ota act Person		
Thomas L. Sota, Inc					
		Firm/Con	npany		
	711 SE 5th Terrace				
		Addre	ess		
	Pompano Beach, Florida 33060 City/State and Zip Code				
	sotaman@tlsdesign.com				
		E-mail address: (to be used for fur	ture annual report notification)		
For fu	rther informa	tion concerning this matter, please ca	11:		
		Tom Sota	at (954) 895-7560 Area Code & Daytime Telephone Number		
	Nan	ne of Contact Person	Area Code & Daytime Telephone Number		
Enclos	ed is a \$35.0	0 check made payable to the Departn	nent 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 catement 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.
. The name of the corporation: Thomas L. Sota Incorporated
2. The principal office address: 711 SE 5th Terrace Pompano Beach, FL. 33060
3. The mailing address (if different):
I. Date of incorporation/qualification: 4/20/2009 Document number: P09000035308
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)
BUSINESS FILINGS INCORPORATED
1203 GOVERNORS SQUARE BLVD., SUITE 101
TALLAHASSEE FL 32301-2960 US
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Thomas L. Sota
711 SE 5th Terrace P.O. Box NOT acceptable
P.O. Box NOT acceptable Pompano Beach, FL. 33060
The street address of its registered office and the street address of the business office of its registered agent, is 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.
Signature of an ollicer of director Thomas L. Sota Printed or typed name and title
hereby accept the appointment as registered agent and agree to act in this capacity. further agree to comply with the provisions of all statutes relative to the proper and complete performance if my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this locument 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.
Strong November 2, 2009
Signature of Registered Agent / Date f signing on behalf of an entity:
Thomas L. Sota 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 * * *