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DIVISION OF CORPORATIONS
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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: THOMFAL, INC.
(Name of Corporation)

DOCUMENT NUMBER: P09000047527

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:

Anita Thompson
(Name of Contact Person)

THOMFAL, INC.
(Firm/Company)

PO BOX 6983
(Address)

SPRING HILL, FL 34611
(City/State and Zip Code)

For further information concerning this matter, please call:

Anita Thompson at (203) 240-2303
(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

