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| (Re | equestor's Name) |) | | | |
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| (Ad | ldress) | | | | |
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| (Cit | ty/State/Zip/Phon | ne #) | | | |
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| (Bu | isiness Entity Na | me) | | | |
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COVER LETTER

| TO: Amendmer Division of | nt Section Corporations | | | | |
|---|---|---|--|--|--|
| SUBJECT: | david harris inter Name of Corp | | | | |
| DOCUMENT NU | MBER: p0900 | 0056913 | | | |
| | ment of Change of Registered Office/A | gent and fee are submitted for filing. | | | |
| Please return all con | rrespondence concerning this matter to | the following: | | | |
| | | | | | |
| harris steinhart Name of Contact Person | | | | | |
| | | | | | |
| | david harris inter | national inc | | | |
| | Firm/Comp | pany | | | |
| | 7044 07 4 | | | | |
| | 5044 nw 87th | | | | |
| | . 100100 | | | | |
| | coral springs flor | rida 33067 | | | |
| | coral springs flor City/State and 2 | Zip Code | | | |
| | hueyspicks@hot | mail.com | | | |
| _ | E-mail address: (to be used for futu | re annual report notification) | | | |
| | | | | | |
| For further informa | tion concerning this matter, please call | : | | | |
| | harris steinhart | at (954) 344-3738 | | | |
| Nan | ne of Contact Person | Area Code & Daytime Telephone Number | | | |
| Enclosed is a \$35.0 | 0 check made payable to the Departme | nt of State. | | | |
| | Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 | Street Address: Amendment Section Division of Corporations Clifton Building | | | |
| | Tallahassee, FL 32314 | 2661 Executive Center Circle | | | |

Tallahassee, FL 32301

TO:

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

| statement of cha | mge is submitted for a co | rporation organize | 607.1508, or 617.1508, Flo d under the laws of the Stat | e of Florida | his | |
|--|--|---|--|---|--|-------------|
| in orde | er to change its registered | office or registered | d agent, or both, in the State | e of Florida. | | |
| 1. The name of | the corporation: david | <u>harris interna</u> | itional inc | | | |
| 2. The principal | office address: 5044 nv | v 87th terrace | | | | |
| | Loral | Springs | , FL 3306 | | | |
| 3. The mailing a | | | | | | |
| 4. Date of incorp | poration/qualification: | 07-01-09 | Document number: | po90000 |)56913 | |
| | d street address of the current of State: (If resigne | | nt and registered office on fi | ile with the | | |
| | ed tunic | | | | | |
| | 5100 dupont blvd | 4 41 | | · | SE S | |
| | ft. lauderdale , florid | da 33308 | | | JUN 27 | <u> </u> |
| 6. The name and (if changed): | d street address of the new | registered agent (| if changed) and /or registere | ed office | 7 AM 9: | LED |
| | harris steinhart | | | | ATE ATE | |
| | 5044 nw 87th terra | | | · | • | |
| | | P.O. Box NOT ac | eceptable | | | |
| | coral springs florida | 33067 | | | | |
| The street address changed will | ess of its registered office be identical. | e and the street ad | dress of the business office | e of its register | red agent, | |
| Such change was authorized by the | • | on duly adopted b ion has been notif | y its board of directors or lied in writing of the chang | by an officer s e. | 60 | |
| Harris Signatur | Meinkatt re dran officer or director | | harris ste | einhart e and title | | |
| I hereby accept I further agree to of my duties, an document is bei corporation has | the appointment as regi to comply with the provi nd I am familiar with and ing filed merely to reflec s been notified in writing | stered agent and a sions of all statute l accept the obliga t a change in the r t of this change. | agree to act in this capacit is relative to the proper an ition of my position as regi registered office address, I | y. d complete pe istered agent hereby confir | rformance Or, if this m that the | |
| Ham | Mun Klus gnature of Registered Agent | <u> </u> | 6 22 5 Date | 2011 | | |
| , and the second | chalf of an entity; | | | | | |
| | yped or Printed Name | | | | | |

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