P09000077457

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COVER LETTER

Amendment Section

TO:

Division of Cor	porations					
SUBJECT:	Tidey Inc. Name of Corporation					
	Name of C	orporation				
DOCUMENT NUMBI	ER:P09	000077457				
The enclosed Statement	of Change of Registered Offic	e/Agent and fee are subm	itted for filing.			
Please return all corresp	ondence concerning this matter	r to the following:				
	David J	lohnson				
Name of Contact Person						
Tidey Inc.						
	Firm/Co	ompany				
	962 Northlake Blvd Address					
	Add	11000				
	i ake Worth	n FI 33403				
	Lake Worth FL 33403 City/State and Zip Code					
	db:2002@u	rohaa aam				
E-m	dbj2803@y ail address: (to be used for t	uture annual report not	fication)			
	`	•	,			
For further information	concerning this matter, please	call:				
	-					
	vid Johnson Contact Person	at (561)	305-6529 ime Telephone Number			
name of	Contact Ferson	Area Code & Day	anne retephone Number			
Enclosed is a \$35.00 ch	eck made payable to the Depar	tment of State.				
	Mailing Address: Amendment Section	Street Address Amendment S	<u>li</u> Section			
	Division of Corporations	Division of C				
	P.O. Box 6327	Clifton Build	•			
	Tallahassee, FL 32314		ve Center Circle			
		Tallahassee, l	EL 32301			

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

statement of cha	nge is submitted for a co	orporation organize	607.1508, or 617.1508, Flo d under the laws of the Sta d agent, or both, in the Stat	te of		
	he corporation: Tidey		a agent, or oom, in the state	e oj 1 toricus.		
	office address: 962 No		ke Park FI, 33403			
3. The mailing a	ddress (if different):					
4. Date of incorp	oration/qualification:	10/16/2009	Document number:	P09000077457		
	street address of the curtment of State: (If resign		nt and registered office on f	ile with the		
	Tidey Inc.					
	1605 Prosperity Farms Rd. Suite B					
	Lake Park Florida	33403				
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):						
	962 Northlake Blvd P.O. Box NOT acceptable					
	Lake Park FI 3340	3				
The street addre	ess of its registered office be identical.	ce and the street ad	dress of the business offic	e of its registered agent,		
Such change wa authorized by th	as authorized by resolut ne board, or the corpora	ion duly adopted b tion has been notif	y its board of directors or led in writing of the chang	by an officer so ge.		
Signatur	e of an other or director		David Johnse Printed or typed man	on Director		
I further agrée l of my duties, an document is bei	the appointment as reg to comply with the prov d I am familiar with an ng filed merely to reflec been notified in writin	isions of all statute d accept the obliga ct a change in the	agree to act in this capaci is relative to the proper a stion of my position as reg registered office address, i	ty. Id complete performance istered agent. Or, if this I hereby confirm that the		
			6/07/	10		
	nature of Registered Agent half of an entity:		Date			
T	David Johnson yped or Printed Name					

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