## P09000092222

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
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SECRE LANGE CORFORATIONS
UNIVISION OF CORFORATIONS

RARDON8 10308/11

## **COVER LETTER**

TO: Amendment Section Division of Corporations					
SUBJECT: AMAZING	BEHAVIOR CHANG Name of Corporation	GES INC			
DOCUMENT NUMBER:	P090000922	22			
The enclosed Statement of Change of F	egistered Office/Agent and	fee are submitted for filing.			
Please return all correspondence concerning this matter to the following:					
·					
WINNIE CHAN Name of Contact Person					
HYTON ACCOUNTING & CONSULTING LLC					
	Firm/Company				
	158-41 76TH AVENU	<u>E</u>			
ye sansan		agagues a figural g			
		SOLVER CHAIN TO POSSESSES			
FRESH MEADOWS, NY 1/1366.  City/State and Zip Code					
	Only total and zip Code				
WC_HYTON@YAHOO.COM					
E-mail address: (to be used for future annual report notification)					
For further information concerning this	matter, please call:				
WINNIE CHAN	at ( 71	820-0008			
Name of Contact Person	Area	8 820-0008 Code & Daytime Telephone Number			
Enclosed is a \$35.00 check made payab	le to the Department of Stat	e.			
Mailing Addre	<u>ss:</u> S1	reet Address:			
Amendment S	ection A	mendment Section			
Division of Co P.O. Box 632		ivision of Corporations lifton Building			
Tallahassee, F	<del>-</del>	661 Executive Center Circle			

Tallahassee, FL 32301



## FLORIDA DEPARTMENT OF STATE Division of Corporations

March 14, 2011

WINNIE CHAN HYTON ACCOUNTING & CONSULTING LLC 158-41 76TH AVENUE FRESH MEADOWS, NY 11366

SUBJECT: AMAZING BEHAVIOR CHANGES INC

Ref. Number: P09000092222

We have received your document for AMAZING BEHAVIOR CHANGES INC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document is illegible and not acceptable for imaging.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6964.

Irene Albritton Regulatory Specialist II

Letter Number: 311A00006098

RECEIVED
11 MAR 24 AM 8: 01
SECRETARY OF STATE
ALLAHASSEE, FLORIO

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

statement of cha	provisions of sections 607.0502, 617.0502, 66 angle is submitted for a corporation organized	under the laws of the State of	of FLORIDA
	er to change its registered office or registered		V
	the corporation: AMAZING BEHAVIO		
2. The principal	office address: 1441 SE 17TH AVENU		
*****	HOMESTEAD, FL 3303	35	
3. The mailing a	address (if different): SAME		
4. Date of incorp	poration/qualification: 11/9/09	_ Document number:	P09000092222
	d street address of the current registered agent tment of State: (If resigned, enter resigned)	and registered office on file	with the
	SYLVIA ACOSTA		
	500 WEST 12TH PLACE		11 K
	HIALEAH, FL 33010		AR SETA
6. The name and (if changed):	d street address of the new registered agent (if	changed) and /or registered	11 HAR 24 AH 8: O4
	SIU MAN WONG		
	1441 SE 17TH AVENUE P.O. Box NOT acce	ant a bila	
	HOMESTEAD, FL 33035	practic	<del></del>
The street address changed will	ess of its registered office and the street addr be identical.	ress of the business office o	of its registered agent,
Such change wa authorized by th	as authorized by resolution duly adopted by ne board, or the corporation has been notifie	its board of directors or by d in writing of the change.	an officer so
-	re of an officer or director	SIU MAN WONG - I	nd title
I hereby accept I further agree to of my duties, and document is bei corporation has	the appointment as registered agent and ag to comply with the provisions of all statutes d I am familiar with and accept the obligati ng filed merely to reflect a change in the reg s beginnotified in writing of this change.	ree to act in this capacity, relative to the proper and c ion of my position as registe gistered office address, I he	complete performance ered agent. Or, if this reby confirm that the
4	( Du	3/20/201	1
Sig	nature of Registered Agent	Date	·
If signing on be	half of an entity:		
	SIU MAN WONG  yped or Printed Name		

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