

P 100000004770

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

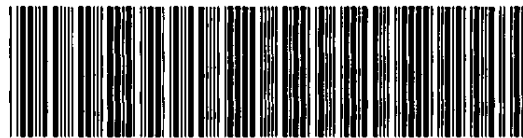
(Business Entity Name)

(Document Number)

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RECEIVED
10 OCT 29 AM 11:24
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Roberts OCT 29 2010



RECEIVED

10 OCT 29 AM 10:30

FLORIDA DEPARTMENT OF STATE
Division of Corporations

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

October 21, 2010

FRED NIZNIK
DIAGNOSTICS 4 LESS INC
14860 N MIAMI AVE
MIAMI, FL 33168

SUBJECT: DIAGNOSTICS 4 LESS INC
Ref. Number: P10000004770

We have received your document for DIAGNOSTICS 4 LESS 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):

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

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) 245-6892.

Tina Roberts
Regulatory Specialist II

Letter Number: 310A00024936

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: DIAGNOSTICS 4 LESS INC
Name of Corporation

DOCUMENT NUMBER: P10000004770

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:

FRED NIZNIK
Name of Contact Person

DIAGNOSTICS 4 LESS INC
Firm/Company

14860 NORTH MIAMI AVE
Address

MIAMI, FL 33168
City/State and Zip Code

MRI4LESS@GMAIL.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

FRED NIZNIK at (305) 816-6257
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

**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 statement 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.

1. The name of the corporation: DIAGNOSTICS 4 LESS INC
2. The principal office address: 14860 NORTH MIAMI AVE, MIAMI, FL 33168
3. The mailing address (if different): SAME AS ABOVE
4. Date of incorporation/qualification: 01/19/2010 Document number: P10000004770
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)

FRED NIZNIK

2216 NORTH 20TH AVE

HOLLYWOOD, FL 33020

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

FRED NIZNIK

14860 NORTH MIAMI AVE

P.O. Box NOT acceptable

MIAMI, FL 33168

The street address of its registered office and the street address of the business office of its registered agent, as 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.

Fred Niznik
Signature of an officer or director

FRED NIZNIK PRES.
Printed or typed name and title

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document 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.

Fred Niznik
Signature of Registered Agent

10/15/2010
Date

If signing on behalf of an entity:

Typed or Printed Name

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

CR2E045 (8/05)

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CLERK OF STATE
TALLAHASSEE, FLORIDA