P10000031555

(Red	questor's Name)	
(Add	dress)	18-01-01-01-01-01-01-01-01-01-01-01-01-01-
(Add	dress)	
(City	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu:	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	5 01 Status
Special Instructions to	Filing Officer:	
		;

Office Use Only



900256661419

∴ 02/14/14--01005--022 **35.00

14 FEB 14 AM 8:56

C. LEWIS
FEB 1 7 2014
EXAMINER

COVER LETTER

Division of Corporations
SUBJECT: CHaway Inc Name of Porporation
DOCUMENT NUMBER: 01000031555
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:
Gail Morales Name of Contact Person
Cutaway Inc Firm/Company
1880 W. Hillsboro Blud Suite
Deerfield Beach, FL 33442 City/State and Zip Code
E-mail address: (to be used for future annual report notification).
For further information concerning this matter, please call:
Gay Wordes Name of Contact Person at (954) 4263100 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 Flouda
in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: CHaway, INC.
2. The principal office address: 1880 W. Hills bore Blud Suite C
Deepfield Beach, FL 33442
3. The mailing address (if different):
4. Date of incorporation/qualification: 4 122010 Document number: P100003153
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)
Amarcia Smallcombe ======
1880 W. Hillstora Blud Suik CER I
Doorfield Reach El 33442
6. The name and street address of the new registered agent (if changed) and /or registered office
(if changed):
- gail Mokayes
1880 M. Hillsporo RING Juite C
Deerfield Beach, FL 33442
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.
Stuffluorales Gail Morales President
Signature of an officer or director 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.
hereby confirm that the corporation has been notified in writing of this change.
Said Worldo 2/11/2014
Signature of Registered Agent Date
If signing on behalf of an entity:
Typed or Printed Name
a product a time a traine

Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

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