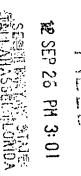
## P10000038127

(Requestor's Name)
· (Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



900240011429



03/26/12--01013--021

\*\*35.80

RAChange

SEP 27 2012

T. LEWIS

GREENMAN&MANZ

## **COVER LETTER**

TO: Amendment Section Division of Corporations
SUBJECT: LAP of the Flor da Keys, Inc.
DOCUMENT NUMBER: P100000 38127
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:
Leigh Ann Card Name of Contact Person
hey han's Coffee House
Po Boy 510047
Key Colony beach, H. 33057
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Leigh Ann Card at (305), 143-2001
Name of Contact Person Area Code & Daytime Telephone Number
Englaved is a \$25.00 shock made namely 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: LAP of The Flurida Keys, Inc.
2. The principal office address: 3015adowski Causeway
Key Colony Bah, 71 33051
3. The mailing address (if different):
4. Date of incorporation/qualification: 5-3-20/0 Document number: P1000038(2
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)
Vosumed: Frank Greeman
5800 Overseally Sut 40 8 F
NA DISTRICT
- Marathon, 47 3305 1 30 50
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Legh Ann Card Leuh Ann Card
301 Sadowski Causeway
PO. Box NOT acceptable
- 124 Coury 13ch 171. 3303 1.
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.
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.
4/1/2012
Signature of Registered Agent Dete
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 (03/12)