

P000047530

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

John
8/26



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 2, 2011

LOUISE M. GUIDO
CHANGECORP., INC.
100 RIVERSIDE BLVD., #20H
NEW YORK, NY 10069

SUBJECT: CHANGECORP., INC.
Ref. Number: P10000047530

We have received your document for CHANGECORP., INC. and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The above entity is a Florida corporation and the document and fee submitted are for a Florida limited liability company. The correct form is enclosed and an additional filing fee of \$10.00 is due.

To change the registered agent or registered office, or both, the enclosed form should be completed and returned to this office with a filing fee of \$35.

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) 245-6880.

Karen Gibson
Document Specialist Supervisor

Letter Number: 111A00018207

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: CHANGE CORP
Name of Corporation

DOCUMENT NUMBER: P10000047530

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:

LOUISE M. GUIDO
Name of Contact Person

CHANGE CORP
Firm/Company

835 So. OSNEY AVE. Suite 210
Address

SARASOTA, FL 34236
City/State and Zip Code

LGUIDO7@YAHOO.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

LOUISE GUIDO at (941) 544-1435
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 _____ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: CHANGE CORP, INC
2. The principal office address: 100 RIVERSIDE BLVD
204 NEW YORK NY 10069
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 6/4/2010 Document number: P10000047530

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)

LOUISE M. GUIDO
1663 EAGLE COURT DRIVE
SALASOTA FL 34232


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TALLAHASSEE, FLORIDA

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

LOUISE M. GUIDO
P35 So. OSPREY AVE. STE 210
P.O. Box NOT acceptable
SALASOTA FL 34236

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

LOUISE GUIDO
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.


Signature of Registered Agent

8/19/11
Date

If signing on behalf of an entity:

LOUISE M. GUIDO
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