P10000058927

(Re	questor's Name)	
,		
(Ad	dress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone	+ #)
PICK-UP	☐ WAIT	MAIL
. (Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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07/28/10--01013--008 **35.00



PA-Charge C.COULLIETTE

JUL 29 2010

EXAMINER

COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Carpet & Mou, Inc. Name of Corporation
DOCUMENT NUMBER: P100000 58927
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:
Stacy Swindle. Name of Contact Person
Curpets + Mou, lrc. Firm/Company
2200 Winter Spring Blood # 106-18-3 Address
City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call: Status Sumul at (40) 267-3388 Name of Contact Person at 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

statement of chang	ovisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this ge is submitted for a corporation organized under the laws of the State of Horida. o change its registered office or registered agent, or both, in the State of Florida.
1. The name of the	corporation: Carpets & Mou Su.
2. The principal of	Tice address: 1200 Winds Springs Blad # 106-183 183 Oviedo, 72 32765
	lress (if different):
4. Date of incorpor	ration/qualification: F-3-2010 Document number: P10000059917
	treet address of the current registered agent and registered office on file with the entry of State: (If resigned, enter resigned)-
_	Starry Swindle
	Starry Swindle 855 8. SR 434 # 1149
-	Winter Springs. In 32708
6. The name and st (if changed):	Stacey SwindL 2200 Winter Springs Blad + 106 - 163 P.O Box NOT acceptable
	Oviedo, 71 32765
The street address as changed will be	of its registered office and the street address of the business office of its registered agent, e identical.
. /	authorized by resolution duly adopted by its board of directors or by an officer so board, or the corporation has been notified in writing of the change. Stacey Swindle President or the ped name and title
	e appointment as registered agent and agree to act in this capacity, comply with the provisions of all statutes relative to the proper and complete performance I amfamiliar with and accept the obligation of my position as registered agent. Or, if this filled merely to reflect a change in the registered office address, I hereby confirm that the een notified in writing of this change.
	7/26/10
If signing on beha	
SFACE	ey Swindle

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