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SECRETARY OF STATE ALL AHASSEE, FLORIDA

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COVER LETTER

TO: Amendment Section Division of Corporations			
SUBJECT: P. I. L. Carpet Inc. Name of Corporation			
DOCUMENT NUMBER: P10000075367			
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:			
Wandy Asen Ju Name of Contact Person			
P.T.L Carpet Inc. Firm/Company			
50989 HWY 27N LIH 349			
Daven Part FL 33897 City/State and Zip Code			
W. Osen 10, 280 hot mail, com E-mail address! (to be used for future annual report notification)			
For further information concerning this matter, please call:			
Wandy Asen 10 Name of Contact Person at (407) 431-1695 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: P. I. L. Carpet Inc. 2. The principal office address: 50989 hwy 27N (of 349)
Daven port Fl 33897
3. The mailing address (if different): (Some)
4. Date of incorporation/qualification: 9-15-10 Document number: Playor 75367
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)
Nancif Perez Hacos S. Semuran Blvd Orlandu H 32822 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
4205 S. Semuran BIVd
<u>Orlando</u> 4 32822
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Wandy Asenso 50989 hwy 271 10+349 P.O. Box NOT acceptable Daven Port 71, 33897
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.
Warely Object or director DUNER 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.
Wandy asum Signature of Registered Agent 10/16/10 Date
If signing on behalf of an entity:
Wandy Asen (U Typed or Printed Name

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