

PI0000078172

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

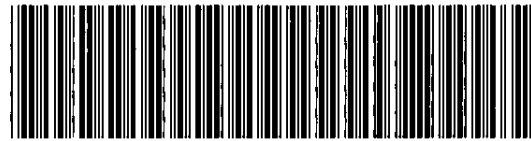
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900214128889

11/14/11--01061--015 **35.00

2011 NOV 14 AM 11:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

LA
C
11-15-11

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: DENDERA CORPORATION
Name of Corporation

DOCUMENT NUMBER: P10000078172

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:

ABRAHAM L. WILCOX
Name of Contact Person

DENDERA CORP.
Firm/Company

7257 NW 4TH BLVD STE 305
Address

GAINESVILLE, FL 32607
City/State and Zip Code

K318WILCOX@YAHOO.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ABRAHAM WILCOX at 352, 519 9508
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

AMENDMENT SECTION
Amendment Section

P.O. Box 6327

AMENDMENT SECTION
Amendment Section

Clifton Building

Tallahassee, FL 32301

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH
FOR CORPORATION**

In 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: DENDERA CORPORATION
2. The principal office address: 7257 NW 4TH BLVD SUITE 305
GAINESVILLE, FL 32607
3. The mailing address (if different): 7257

4. Date of incorporation/qualification: 09/22/2010 Document number: P10000078172

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)

BLAKE BROWN
4300 NW 23RD AVE SUITE 527
GAINESVILLE, FL 32606

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

BLAKE BROWN
7257 NW 4TH BLVD SUITE
GAINESVILLE, FL 32607

P.O. Box NOT acceptable

RECEIVED
TALLAHASSEE, FLORIDA
2011 NOV 14 AM 11:10
FILED

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]
Signature of an officer or director

ABRAHAM VILLAR MGR
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]
Signature of Registered Agent

11 / 01 / 2011
Date

If signing on behalf of an entity:

BLAKE BROWN
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 (8/05)