P12000053225

(Re	questor's Name)	
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Certified Copies	_ Certificates	of Status
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COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: CSA ICECREAM INC

Name of Corporation

DOCUMENT NUMBER: P12000053225

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:

CHRISTINE ABRUSCATO

CSA ICECREAM INC

Firm/Company

290 SANDPIPER AVE

Address

ROYAL PALM BEACH FL 33411

City/State and Zip Code

DESJARDINSCHRISTINE@YAHOO.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

CHRISTINE ABRUSCATO

Name of Contact Person

483-4618

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

CR2E045 (03/12)

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

1. The name of the corporation: CSA ICE CREAM INC

2. The principal office address: 290 SANDPIPER AVE, ROYAL PALM BEACH FL 33411

3. The mailing address (if different):

4. Date of incorporation/qualification: 6/12/2012 Document number: P12000053225

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)

UNITED STATES CORPORATION AGENTS, INC

13302 WINDING OAK COURT A

TAMPA, FL 33612

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

CHRISTINE ABRUSCATO

290 SANDPIPER AVE

P.O Box NOT acceptable ROYAL PALM BEACH, FL 33411

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.

CHRISTINE ABRUSCATO PRESIDENT Printed or typed name and title

Date

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

If signing on behalf of an entity:

 $1 \cap C$ 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)