## P12000054730

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
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(Bu	siness Entity Nan	ne)
(Do	cument Number)	
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T. LEMIEUX



## **COVER LETTER**

Division of Corporations			
That I come I to			
SUBJECT: DEBBIE STEWN TWO Name of Corporation			
DOCUMENT NUMBER: P12000054730			
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:			
Name of Contact Person			
Name of Contact Person			
Your Company The			
DEBBIE STERN INC Firm/Company			
·			
406 BRIARCLIFF CIRCLE Address			
SEBASTIAN FL 32958			
City/State and Zip Code			
me 4247 a concest, not			
E-mail address: (to be used for future annual report notification)			
For further information concerning this matter, please call:			
MICHAEL STERV at (772) 918-8802  Name of Contact Person Area Code & Daytime Telephone Number			
Name of Contact Person Area Code & Daytime Telephone Number			
Enclosed is a \$35.00 check made payable to the Department of State.			
Enclosed is a \$55.00 encer made payable to the Department of State.			
Mailing Address: Street Address:			
Amendment Section Amendment Section			
Division of Corporations Division of Corporations			
P.O. Box 6327 Clifton Building			
Tallahassee, FL 32314 2661 Executive Center Circle			
Tallahassee, FL 32301			

TO: Amendment Section

## 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:  DEBBLE STEW INC.
2. The principal office address: 406 BRIAR CLIFF CIRCLE
SEBASTIAN FL 32958
3. The mailing address (if different): Same
4. Date of incorporation/qualification: 6-18-12 Document number: P120000 5+730
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)
DEBRA A. STERN
7125 NW 107 AVE
TAMARAC FL 33324
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
DEBRA A. STERN SSR 20 F
P.O. BOX NOT acceptable
P.O. BOX NOT acceptable  SEBASTIAN FL 32958
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.
authorized by the board, or the corporation has been notified in writing of the change.
Signature of an officer or director  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
If signing on behalf of an entity:
De bra A Sterw  Typed or Printed Name

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