P93000007846

(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
—	—	—
☐ PICK-UP	WAIT	MAIL
(Bu	isi <mark>ness</mark> Entity Nan	ne)
		,
(Document Number)		
Certified Copies Certificates of Status		
Connected to the state of the s	T.U OH	
Special Instructions to Filing Officer:		

Office Use Only



600084712806

01/18/07--01022--012 **35.00

07 JAN 18 PM 3: 3: SECRETARY OF STATE ALLAHASSEE, FLORIC

RAChange 01/23/07 DC.

COVER LETTER

Division of Corporations			
SUBJECT: BUYER'S PICCE (Name of Co	orporation)		
DOCUMENT NUMBER: P930000	07846		
The enclosed Statement of Change of Registered Office	e/Agent and fee are submitted for filing.		
Please return all correspondence concerning this matter	to the following:		
MARNU EDE (Name of Con	Itact Person)		
Buyer's PFD TNC. (Firm/Company)			
6918 Brief	cveck (+.		
(City/State an	th FL 34202 d Zip Code)		
For further information concerning this matter, please call:			
MARTIN EDE MAN (Name of Contact Person)	at (91) 373 - 6981 (Area Code & Daytime Telephone Number)		
Enclosed is a \$35.00 check made payable to the Departs	ment 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		

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
in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: Byer's Preferred, INC. 2. The principal office address: 16 Window and Isle, Palm Beach Gardens FL 33418
2. The principal office address: 10 32410
3. The mailing address (if different):
4. Date of incorporation/qualification: 2/1/93 Document number: P930000784
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
16 WINDWARD ISG
Palm BEACH Gardens FL
33 4/8 Es 5
6. The name and street address of the new registered agent (if changed) and /or registered office ARR JAN (if changed): MONDY EDE MAN 6918 BYLL CYELK CT. (P.O. BOX NOT acceptable) Lake wood Ranch FL 34202
6918 Brier Creek Ct. ESS & D
(P.O. Box NOT acceptable)
Lakewood Kench FL 34202
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.
MNDN Edelman P
(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.
1/10/07
(Signature of Registered Agent) (Date)
If signing on behalf of an entity:
(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)