

(Requestor's Name) (Address) (Address)	2002104196
(City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name)	08/04/1101024-
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and the same

COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT:	CHANGE OF RESIDENT AGENT
	Name of Corporation,
DOCUMENT NUME	BER: P930000 47184
The enclosed Statemer	nt of Change of Registered Office/Agent and fee are submitted for filing.
Please return all corres	spondence concerning this matter to the following:
<u> </u>	ANNIE MAY DAVIDSON
	Name of Contact Person
	LILINADTY DUMPTY 4.9. 2
	HUMPTY DUMPTY 1& 2 Firm/Company
	Firm/Company
	ACAA MARCHINIC MARCH MANA
,	1211 WISHING WELL WAY
	Address
والمتعادمة	TAMPA FLORIDA 33619
	City/State and Zip Code
•	HDACADEMY09@YAHOO.COM
E-	mail address: (to be used for future annual report notification)
For further information	n concerning this matter, please call:
ANNIE	MAY DAVIDSON at (813) 690-7330 of Contact Person Area Code & Daytime Telephone Number
Name	of Contact Person Area Code & Daytime Telephone Number
Enclosed is a \$35.00 c	heck 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

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: HUMPTY DUMPTY Land And 11, Inc.
2. The principal office address: 1211 WISHING WELL WAY TAMPA FLORIDA 33619
3. The mailing address (if different): 3902 E. BLOOMINGDALE AVE VALRICO FL. 33594
4. Date of incorporation/qualification: 6/28/93 Document number: P93'0000 47/84
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)
MICHAEL EDENFILED
MASON STREET BRANDON FLORIDA 33511
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
ANNIE MAY DAVIDSON
1211 WISHING WELL WAY TAMPA FLORIDA 33619 P.O. Box NOT acceptable
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.
ANNIE MAY DAVIDSON, CEO Signature of an office for director ANNIE MAY DAVIDSON, CEO 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.
Onne May Davidson ANNIE MAY DAVIDSON, CDA 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