## P93000075169

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RA Change

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

SUBJECT: CRYSTALFLOW, INC.

Name of Corporation

DOCUMENT NUMBER. P93000075169

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:

ANTHONY TAYLOR

Name of Contact Person

CRYSTALFLOW, INC.

Firm/Company

400 VILLAGE BLVD. STE H

Address

WEST PALM BEACH, FL 33409

City/State and Zip Code

eclinic@bellsouth.net

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

For further information concerning this matter, please call:

ANTHONY TAYLOR

,561 \623-0180

Name of Contact Person

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

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

in order to change its registered office or registered agent, or both, in the State of Florida.  1. The name of the corporation: CRYSTALFLOW, INC.  2. The principal office address: 400 VILLAGE BLVD. STE H  WEST PALM BEACH, FL 33409-6605  3. The mailing address (if different):  4. Date of incorporation/qualification: 10/29/1993 Document number: P93000075169  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)  ANTHONY TAYLOR  1124 KEY PLAZA  KEY WEST, FL 33040  6. The name and street address of the new registered agent (if changed) and /or registered office of file and street address of the new registered agent (if changed) and /or registered office address of the new registered agent (if changed) and /or registered office address of the new registered agent (if changed) and /or registered office address of the new registered agent (if changed) and /or registered office of its registered agent, (if changed) and /or registered 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.  ANTHONY TAYLOR (PRESIDENT)  Prince of the appointment as registered agent and agree to a cange in this capacity. In this capacity, I further agree to capacity with the provisions of all violutes relative to the proper and complete performance of my dulies, and and 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.  10/18/2013  Document number:	statement of change is	sions of sections 607.0502, 617.0502, 6 s submitted for a corporation organize	ed under the laws of the State of FLOR	RIDA		
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If signing on behalf of an entity:	Ma		10/18/2013			
	Signature o	of Registered Agent	Date			
ANTHONY TAYLOR (PRESIDENT)	If signing on behalf of	of an entity:				
Typed or Printed Name						

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (03/12)

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