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-	(Ci	ty/State/Zip/Phone #)	
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	(Bı	siness Entity Name)		
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COVER LETTER

TO: Amendment S Division of Co	ection orporations	-				
SUBJECT: Mo	ses Cleaners. In	corporation)				
DOCUMENT NUMBER: <u>P93000079525</u>						
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:						
Ì	Noidrie Moses					
	(Name of co	ntact person)				
	Moses Cleaner	s. Inc.				
	(Firm/C	ompany)	•			
**		·	~			
	5550 S. U.S.	HWY 441.				
	(Add	iress)				
	lake City:	1 32025				
/						
For further information	n concerning this matter, please	call:				
Cherilus 1	Mnerc	at (386)	755-6874			
Name	of contact person)	(Area code & d	755 - 6874 aytime telephone number)			
# _ \						
Enclosed is a \$35.00 c	heck made payable to the Depar	tment of State.				
:	Mailing Address:	<u>Street Addı</u> Amendmen				
44.	Division of Corporations	Division of	Corporations			
1	P.O. Box 6327 Tallahassee, FL 32314	409 E. Gain Tallahassee,	es Street FL 32399			
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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. th order to change its registered office or registered agent, or both, in the State of Florida.
in order to change its registered office of registered agent, or both, in the State of Piorial.
1. The name of the corporation: Moses Cleaners, Inc.
2. The principal office address: 5550 S. U.S. Hwy 441
Lake City, FL 32025
3. The mailing address (if different):
4. Date of incorporation/qualification: 11 17 1993 Document number: P93000079525
5. The name and street address of the current registered agent and registered office on file with the
Florida Department of State:
Corporation Service Company
2711 Centerville Road, Suite 400
the control of the co
Wilmington, DE 19808 Pr
6. The name and street address of the new registered agent (if changed) and /or registered office
(if changed):
Noldrie Moses
5550 S. U.S. Hwy 441 70 10 17 10 10 10 10 10 10 10 10 10 10 10 10 10
(P.O. Box NOT acceptable)
Lake City FL 32025
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.
(Signature of arrollicer or director) Noidrie Moses PresidenT (Printed or typed name and title)
I hereby accept the appointment as registered agent and agree to act in this capacity.
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 decimant is being filed merely to reflect a change in the registered office address. I hereby confirm that the
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.
2/200-10/31/04
(Signature of Registered Agent) (Date)
If signing on bchalf 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