P93000083871

(Requestor's Name)					
(Address)					
(Ad	dress)				
(Cit	ty/State/Zip/Phon	e#)			
PICK-UP	☐ WAIT	MAIL			
(Business Entity Name)					
(Document Number)					
Certified Copies	Copies Certificates of Status				
Special Instructions to Filing Officer:					
:					

Office Use Only



500187734375

11/24/10--01004--001 **280.00

SECRETARY OF STATE

R.A.

R NOV 30 2010

COVER LETTER

Division of Corporations -				
SUBJECT: Senior Citizen Michaels Corp.				
(Name of Corporation)				
DOCUMENT NUMBER: P93000083871				
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:				
Peter F. Souza				
(Name of Contact Person)				
NRAI Corporate Services, LLC				
(Firm/Company)				
2731 Executive Park Drive, Suite 4				
(Address)				
Weston, FL 33331				
(City/State and Zip Code)				
For further information concerning this matter, please call:				
Peter F. Souza at (877) 261-6823 x 1759				
Peter F. Souza at (877) 261-6823 x 1759 (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

•	•	0502, 607.1508, or 617.1508, Florida St	
-		ganized under the laws of the State of <u>Fl</u> gistered agent, or both, in the State of Flo	
1. The name of the corporation: Senior Citizen Michaels Corp.			
2. The principal	office address: 3 E. STOW ROAD, M	IARLTON NJ 08053	
3. The mailing a	address (if different):		
4. Date of incorp	poration/qualification: 12/7/1993	Document number: P93000	083871
5. The name and		ed agent and registered office on file with	
	GUY BOND, ESQUIRE		
	1800 FLORIDA NATIONAL T	OWER	201 TAS
	JACKSONVILLE, FL 32202		2010 NOV 24 SECRETAR'S TALLAHASS
6. The name and (if changed):	d street address of the new registered a	agent (if changed) and /or registered offic	EFO TO
	NRAI Services, Inc.		F STA
	2731 Executive Park Driv	ve, Suite 4	RID RID
	(P.O. Box NOT accepted Weston, FL 33331	able)	
The street address changed will	ess of its registered office and the stre l be identical.	eet address of the business office of its	registered agent,
Such change was authorized by the	as authorized by resolution duly adop he board, or the corporation has been	pted by its board of directors or by an or notified in writing of the change.	officer so
(Signat	the of the officer or director)	Tony Smith, Assistant Secretary (Printed or typed name and till	
I hereby accept I further agree of my duties, ar document is be corporation ha	t the appointment as registered agent to comply with the provisions of all s nd I am familiar with and accept the ing filed merely to reflect a change in s been notified in writing of this chan	t and agree to act in this capacity. statutes relative to the proper and comp obligation of my position as registered n the registered office address, I hereby nge.	plete performance agent. Or, if this y confirm that the
(Si	gnature Registered Agent)	//// 10/20) D	
If signing on be	chalf of an entity:		
Peter F So	uza Assistant Secretary		

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

(Typed or Printed Name)