P.9400014439

Office Use Only



900060433449

HU/17/U5--U1010--002 **35.00

2005 OCT 17 AN IO: 59

\$ 10/20/05

COVER LETTER

TO:	Amendment Section	n utions			2005 0	CT 17	AH 10: 59
	Division of Corpora				TALLAHASSEE FLO		ur STATE E FLORIDA
SUBJI	ECT:	WHITE LION MOVING	G & STORA	GE, INC.		_= -:	· ====.
000		(Name	of corporati	on)		= =:	
DOCI	MENT NUMBER:	P94000014439				-	
The en	closed Statement of C	Change of Registered C	Office/Agent	and fee are	submitted for f	īling.	
Please	return all corresponde	ence concerning this m	atter to the	following:			
		GPE	G FISCHER				
	•		Contact pe		7.00 1	-	
		•	•	,			
		WHITE LION M			IC.		
		(Firr	n/Company)			
		5030 CHAN	MPION BLV	D, #6-269			
		(Address)				
		BOÇA RA	ATON, FL 3	3496			
		(City/sta	ate and zip o	ode)		*	
For fur	rther information com	cerning this matter, ple	ase call:				
	GREG F	ISCHER	at (_	561 ₁	997-2400		
	(Name of co	ntact person)		Area code &	daytime telep	hone num	iber)
Enclos	sed is a \$35,00 check	made payable to the Di	enariment o	f State			

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassec, FL 32314

Street Address: Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399

CR2E045(6/04)

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

statement of change is submitted	e for a corporation or game and a tree tarts of the blace of	RIDA				
in order to change its r	egistered office or registered agent, or both, in the State of Florida.					
1. The name of the corporation:	WHITE LION MOVING & STORAGE, INC.					
2. The principal office address:_	5030 CHAMPION BLVD, #6-289					
	*					
3. The mailing address (if differ	ent):	···				
4. Date of incorporation/qualific	ation: 02/18/1994 Document number: p940000144	39				
5. The name and street address of Florida Department of State:	of the current registered agent and registered office on file with the					
	GREG FISCHER	70.				
5030 CHAMPION BLVD, #6-269						
<u></u> _	BOCA RATON, FL 33496	T I7				
6. The name and street address (if changed):	of the new registered agent (if changed) and /or registered office	AN IO:				
<u> </u>	HEIDI M. ROTH, ESQUIRE	J: 59 TATE DRIDI				
	2600 DOUGLAS ROAD, SUITE 501	⊅ ,				
	(P.O. Box NOT acceptable)					
<u></u>	CORAL GABLES, FL 33134					
The street address of its registe as changed will be identical.	ered office and the street address of the business office of its regis	stered agent,				
Such change was authorized be authorized by the logid, or the	y resolution duly adopted by its board of directors or by an office corporation has been notified in writing of the change.	er so				
	GREG FISCHER, PRESIDENT	Γ				
(Signature of appointment of the suppointment of the suppointment of the suppointment of the suppointment is being filed merely corporation has been notified (Signature of Measure of Signature of Measure of the suppointment of	nt as registered agent and agree to act in this capacity the provisions of all statutes relative to the proper and complete with and accept the obligation of my position as registered agent to reflect a change in the registered office address, I hereby conjugation of his change. (Date)	performance nt. Or, if this firm that the				
(Typed or Frinted Nar	me)					

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