P94000020434

(Re	equestor's Name)	
,		
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL .
(Bu	isiness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
	Office Use Or	nly



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12/18/09--01012--009 **35.00

COVER LETTER

Division o	of Corporations	•		
SUBJECT:		anch, inc.		
<u></u>	Name	of Corporation		
DOCUMENT N	JMBER:F	94000020436		
The enclosed State	ement of Change of Registered (Office/Agent and fee are subm	itted for filing.	
Please return all co	orrespondence concerning this n	natter to the following:		
		e Hammond f Contact Person		
	rane o	r Contact r orson		
C & D Ranch, Inc.				
	Fir	m/Company		
	c/o Nailtiques	10315 102nd Terrrace	·	
		Address		
	Sehasi	ian, FL 32958		
	City/Sta	ate and Zip Code		
	diane@	nailtiques.com		
•	E-mail address: (to be used	for future annual report not	ification)	
For further inform	nation concerning this matter, ple	ease call:		
	Diane Hammond	at (305)	632-9839 time Telephone Number	
Na	ame of Contact Person	Area Code & Day	time Telephone Number	
Enclosed is a \$35	.00 check made payable to the D	epartment of State.		
	Mailing Address: Amendment Section Division of Corporation P.O. Box 6327 Tallahassee, FL 32314	Clifton Build	Section Corporations ling ve Center Circle	

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

statement of cha	nge is submitted for a corp	oration organi), 607.1508, or 617.1508, Flo zed under the laws of the Stat red agent, or both, in the Stat	te of Florida			
1. The name of	the corporation: C & D	Ranch, Inc	<u> </u>				
2. The principal office address: c/o Naittiques 10315 102nd Terrace							
Sebastian, FL 32958							
3. The mailing a	nddress (if different):						
4. Date of incor	poration/qualification:	1994	Document number:	P94000020436			
	d street address of the curre rtment of State: (If resigned		ent and registered office on f	file with the			
	Diane Hammond						
	12415 SW 136th Ave #7						
	Miami, FL 33186						
6. The name and (if changed):	d street address of the new Diane Hammond	registered agen	t (if changed) and /or register	SECRETARY OF TALLAHASSEE, FL			
	10315 102nd Terrac	· o		EC HAS			
P.O. Box NOT acceptable							
	Sebastian, FL 3295	8					
The street addr	ess of its registered office I be identical.	and the street	address of the business offic				
/ 1			by its board of directors or tified in writing of the change				
Mare	Ammund Le of an officer or director		Diane Ha	mmond ne and title			
, -	•	tered agent an ions of all stat accept the obli a change in th of this change.	d agree to act in this capaci utes relative to the proper a igation of my position as reg e registered office address,				
If signing on b	ehalf of an entity:						
CHA KA	Typed or Printed Name						

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