P95000019244

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(Requestor's Name)		
	,	
(Address)		
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(Cit	y/State/Zip/Phone	> #)
PICK-UP	MAIT	MAIL
(Bu	siness Entity Nan	ne)
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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SECRETARY OF STATE

TALLAHASSEE F STATE

1000 5/31/07

COVER LETTER

	on of Corporations	
SUBJECT: S	ubway Associates, Inc. (Name of Co	rporation)
DOCUMENT	NUMBER: P95000019244	
The enclosed S	statement of Change of Registered Office	Agent and fee are submitted for filing.
Please return a	ll correspondence concerning this matter	to the following:
	Rita Weller	n come
	(Name of Con	tact Person)
	(Firm/Con	mpany)
	6252 Floridian Circle	
	(Addr	ess)
	Lake Worth, Florida 33463	17. ()
	(City/State and	• ,
For further into	ormation concerning this matter, please ca	_
Rita Weller	(Name of Contact Person)	at (561) 967-0608 (Area Code & Daytime Telephone Number)
	((
Enclosed is a \$	35.00 check made payable to the Departr	nent of State.
	Mailing Address: Amendment Section Division of Corporations P.O. Box 6327	Street Address: Amendment Section Division of Corporations Clifton Building
	Tallahassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this nge is submitted for a corporation organized under the laws of the State of Florida r to change its registered office or registered agent, or both, in the State of Florida.
1. The name of t	he corporation: Subway Associates, Inc.
2. The principal	office address: 6555 Somerset Circle, Boca Raton, Florida 33496
3. The mailing a	ddress (if different):
4. Date of incorp	poration/qualification: 03-09-1995 Document number: P95000019244
	street address of the current registered agent and registered office on file with the tment of State:
	Arthur W. Lambertus, Esq. Zeg 28
	2929 E. Commercial Blvd., Ste. 604
	Ft. Lauderdale, FL 33308
6. The name and (if changed):	street address of the new registered agent (if changed) and /or registered office 29 29 29 29
	RITA Weller 6252 FLORIDIAN CRO (P.O. BOX NOT acceptable) LAKE WORTH FZ 33463
The street addre as changed will	ss of its registered office and the street address of the business office of its registered agent, be identical.
_	as authorized by resolution duly adopted by its board of directors or by an officer so the board, or the corporation has been notified in writing of the change. The weller for director (Printed or typed name and title)
Xila	the appointment as registered agent and agree to act in this capacity. o comply with the provisions of all statutes relative to the proper and complete performance d I am familiar with and accept the obligation of my position as registered agent. Or, if this ng filed merely to reflect a change in the registered office address, I hereby confirm that the been notified in writing of this change. Solution Solution
SUBWA	half of an entity: HASSOCIATES, INC. The synd or Printed Name)

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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

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