

P95000023393

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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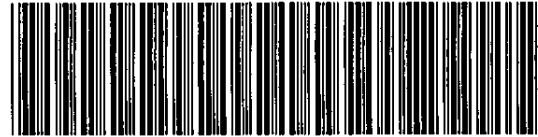
(Business Entity Name)

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## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Duffy's of West Palm Beach, Inc.  
(Name of Corporation)

**DOCUMENT NUMBER:** 095000023393

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:

Joel P. Koeppel, Esquire  
(Name of Contact Person)

Koeppel Gottlieb Mesches  
(Firm/Company)

525 South Flagler Drive, Suite 200  
(Address)

West Palm Beach, FL 33401  
(City/State and Zip Code)

For further information concerning this matter, please call:

Joel P. Koeppel, Esquire at ( 561 ) 659-4020  
(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

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 in order to change its registered office or registered agent, or both, in the State of Florida.

- CR2E045 (8/05)

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