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TRANSMITTAL LETTER

TO: Amendment Section

Division of Corporations

SUBJECT:

GAUSEMEL, INC.

DOCUMENT NUMBER:

P95000087517

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:

Michael D. Mopsick, Esq.

Buckingham, Doolittle & Burroughs, LLP
2500 N. Military Trail, Suite 480

Boca Raton, FL 33431

For further information concerning this matter, please call:

Michael Mopsick at 561-241-0414

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 409 E. Gaines Street Tallahassee, FL 32399

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

			02, 607.1508, or 617. the laws of the State o			ıent of in order
			oth, in the State of Flor			
1. The name of t	he corporation:	GAUSEMEL,	INC.			
2. The principal	office address:	151 SE 1s	t Avenue			
			n. FL 33432	-		
3. The mailing a	ddress (if different);		<u> </u>			
4. Date of incorp	oration/qualification	n: 11/14/1995	Document nun	nber: <u>P9500008</u>	7517	
	street address of the timent of State:	e current registered	agent and registered o	ffice on file with th	e	
	Mops	ick, Michael	D			
	2500	N. Military	Trail, Suite 48	0	ALL PL	
	Воса	Raton, FL 33	431		FEB 12 A	
6. The name and (if changed):	street address of the	e new registered age	ent (if changed) and /o	r registered office	2 AMI	
	BDB	AGENT CO	<u> </u>			
	2500	N. Military	Trail, Suite 48	0	DA E	
		(P.O. Box or personal	mailbox NOT acceptable)			•
	Воса	Raton, FL 33	431			-
The street addre changed will be	ss of its registered of identical.	office and the stree	t address of the busin	ess office of its reg	gistered agent,	as
Such change wa the board, or the	s authorized by res corporation has be	olution duly adopte en notified in writ	ed by its board of dire	ectors or by an office	cer so authoriz	zed by
By Typ	ignature of an officer or di	usund	Ke	rry L. Gausem		ent
being filed mere	the appointment as o comply with the p familiar with and a ly to reflect a chan writing of this chan	accept the obligations in the registered	nd agree to act in thi ututes relative to the p on of my position as r d office address, I her	s capacity. proper and complet egistered agent. C eby confirm that th	e performance or, if this docu se corporation	e of my ment is has
	Signature of Registered A	gent)	<u> </u>	(Date)		
If signing on bel	nalf of an entity:					
Myn	ationin	d		p		
Mich	(Typed or Printed Name)	ICK		(Capacity)		

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