

P95000088837

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

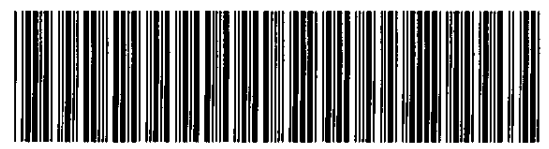
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100126267831

04/30/08--01022--009 **35.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
08 MAY 19 AM 10:18

Ro/change
@ 5/30/08

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: ALINA ALFONSO BAIL BONDS
(Name of Corporation)

DOCUMENT NUMBER: P95000088837

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:

ALINA ALFONSO
(Name of Contact Person)

ALINA ALFONSO BAIL BONDS
(Firm/Company)

2530-B SW 87TH AVENUE
(Address)

MIAMI, FL. 33165
(City/State and Zip Code)

For further information concerning this matter, please call:

ALINA ALFONSO at (305) 644-1888
(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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 5, 2008

ALINA ALFONSO
ALINA ALFONSO BAIL BONDS
2530-B SW 87TH AVENUE
MIAMI, FL 33165

SUBJECT: ALINA ALFONSO BAIL BONDS, INC.
Ref. Number: P95000088837

We have received your document for ALINA ALFONSO BAIL BONDS, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6964.

Irene Albritton
Regulatory Specialist II

Letter Number: 708A00028523

RECEIVED
2008 MAY 19 AM 8:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

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.

- 1. The name of the corporation: ALINA ALFONSO BAIL BONDS
- 2. The principal office address: 2530-B SW 87TH AVENUE
MIAMI, FL. 33165
- 3. The mailing address (if different): same as above
- 4. Date of incorporation/qualification: 11-20-1995 Document number: P95000088837

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

ALINA ALFONSO
~~2530-B SW 87TH AVENUE~~ 1801 NW 75th #3
~~MIAMI, FL. 33165~~ miami, fl 33125

FILED
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS
 08 MAY 19 AM 10:18

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Alina Alfonso
2530-B SW 87th Avenue
 (P.O. Box NOT acceptable)
Miami, FL 33165

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

Alina Alfonso
 (Signature of an officer or director)

ALINA ALFONSO
 (Printed or typed name and title)

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

Alina Alfonso
 (Signature of Registered Agent)

4.20.08
 (Date)

If signing on behalf of an entity:

ALINA ALFONSO
 (Typed or Printed Name)

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

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