P96000004823

(Req	uestor's Name)				
(Add	ress)				
(Add	ress)				
(City	/State/Zip/Phone	e #)			
PICK-UP	☐ WAIT	MAIL			
(Business Entity Name)					
(Document Number)					
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SECRETARY OF STATE TALLAHASSEE, FLORIDA

OCT 23 2014 T. CARTER

RA RO Chanse

COVER LETTER

TO: Amendment Section Division of Corporations

Sable Resorts, Inc

Name of Corporation

P96000004823

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:

Jerry Fadgen, CPA

Name of Contact Person

Jerry Fadgen & Co

Firm/Company

21 East Acre Drive

Plantation, FL 33317

City/State and Zip Code

jerryfad@aol.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jerry Fadgen

Name of Contact Person

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

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

statement of ch	ange is submitted	for a corporation organ	02, 607.1508, or 617.1500 nized under the laws of th tered agent, or both, in th	e State of FLOR	IDA	
1. The name of	the corporation:	Sable Resort	s, Inc			
	office address:	21 East Acre Di	rive, Plantation, F	L 33317		
3. The mailing	address (if differen	nt): P O Box 489,	Fort Lauderdale,	FL 33302		
4. Date of incom	poration/qualifica	tion: 01/12/1996	Document number	<u>P9600000</u>	4823	
		the current registered a fresigned, enter resigned	agent and registered officed)	e on file with the	3	
	RESIGNED					
c 000					14 OCT	SECRE!
6. The name an (if changed):			nt (if changed) and /or re	gistered office	14 OCT 10 PM12: 05	ASSEE,
	21 East Acr	e Drive			12: 05	STATE
	Plantation	P.O. Box NOT FL 33317	Γ acceptable			À
The street addr as changed wil	ess of its registere l be identical.	ed office and the street	address of the business	office of its regi	stered a	agent,
Such change w authorized by t	as authorized by the board, or the c	resolution duly adopted orporation has been no	d by its board of director of the control of the co	s or by an office hange.	er so	
A M	ur of an officer or direct	for	Lawrence Dupre	y - Director		
I hereby accep I further agree performance of agent. Or, if the hereby confirm	the appointment to comply with the f my duties, and I his document is be that the corpora	as registered agent an ne provisions of all stat am familiar with and c ning filed merely to refition has been notified it	nd agree to act in this caputes relative to the propaction of indication of indication of the register writing of this change.	pacity. er and complete ny position as re stered office add	egistere Iress, I	ed .
Jus Si	grature of Registered A	gent	09/24/2014	ite		
If signing on be	ehalf of an entity:					
JERRY	FADGEN (

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

Typed or Printed Name