## P94000000572

. (Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
	•	,

Office Use Only



000109083580

09/10/07--01013--028 \*\*35.00

SECRETARY OF STATE OF STATE OF CORPORATIONS

## COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: New Frontier Ventures, INC
(Name of Corporation)

DOCUMENT NUMBER: P 96 00000 75 72

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:

Name of Contact Person)

(Name of Contact Person)

(Firm/Company)

(Address)

FT Myess, FL 33902 (Gity/State and Zip Code)

For further information concerning this matter, please call:

Jerry W. Rusty" Ingol Sat (239) 656-0943 (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, statement of change is submitted for a corporation organized under the laws of the State of Florida Statutes.	
in order to change its registered office or registered agent, or both, in the State of Florida.	•
1. The name of the corporation: New Frontier Ventures, Iw	<u>C</u>
2. The principal office address: ZOZZ HENORY 5T	
Fort Myers, FC 33901	<del> </del>
3. The mailing address (if different): Po Sox ///8	
FT Myers FL 33902	
4. Date of incorporation/qualification: Document number: P96 C	0000757
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:	
Jerry W. Ingalls	
3934 Hippen Acres Circle	
N FT Myers, FL 33903	
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):	NECKET TO LOS
JONATHAN D. CONDUT	PA PORT
COZZ HENDY ST (P.O. Box NOT acceptable)	4. AA
FT MYESS, FL 33901	<b>o</b> 5
The street address of its registered office and the street address of the business office of its register as changed will be identical.	
Such change was authorized by resolution duly adopted by its board of directors or by an officer authorized by the board or the corporation has been notified in writing of the change.	so
(Signature of an officer or director)  Serry Image 1) S Piesio (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 ham familiar with and accept the obligation of my position as regagent. Or, if this document is being fited merely to reflect a change in the registered office addressed confirm that the corporation has been notified in writing of this change.	istered ess, I
Wignature of Registed Agent)  (Date)	
If signing on behalf of an entity:	
A signing on contain or gracinity.	
(Typed or Printed Name)	

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