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TÄLLAHASSEE, FLORIDA

## **COVER LETTER**

TO: Amendment Section Division of Corporations	
SUBJECT: Tasha Consulting Corp.  (Name of corporation)	فالمحارين
DOCUMENT NUMBER: P96000011643	
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 L. Trop, Esq. (Name of contact person)	04007-
Adorno & Yoss, P.A.	200
(Firm/Company)	TTON US
350 East Las Olas Boulevard, Suite 1700 (Address)	ORIDA ORIDA
Fort Lauderdale, FL 33301	
(City/state and zip code)	, , , , , , , , , , , , , , , , , , ,
For further information concerning this matter, please call:	
Michael L. Trop at (954 ) 766-7802  (Name of contact person) (Area code & daytime telephone no	imber)

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this nge is submitted for a corporation organized under the laws of the State of <u>Florida</u> to change its registered office or registered agent, or both, in the State of Florida.
1. The name of t	he corporation: Tasha Consulting Corp.
	office address: 513 Coconut Isle, Fort Lauderdale, FL 33301
3. The mailing a	ddress (if different): Same
4. Date of incorp	poration/qualification: 2/2/96 Document number: P96000011643
	street address of the current registered agent and registered office on file with the tment of State:
	D. Janet Moore
	513 Coconut Isle
	Fort Lauderdale, FL 33301
6. The name and (if changed):	street address of the new registered agent (if changed) and /or registered office
	Michael L. Trop, Esq.
	350 East Las Olas Boulevard, Suite 1700
	(P.O. Box NOT acceptable)  Fort Lauderdale, FL 33301
The street addre as changed will	ss of its registered office and the street address of the business office of its registered agent, be identical.
Such change wa authorized by th	s authorized by resolution duly adopted by its board of directors or by an officer so e board, or the corporation has been notified in writing of the change.
	D. Janet Moore, President (Printed or typed name and title)
I hereby accept a light of the second of the	the appointment as registered agent and agree to act in this capacity.  o comply with the provisions of all statutes relative to the proper and complete performance of I am familiar with and accept the obligation of my position as registered agent. Or, if this age filed merely to reflect a change in the registered office address, I hereby confirm that the been notified in writing of this change.
Mulus (Sig	ALL OD SEAT. J.Y. JOOY nature of Registered Agent)  SEAT. J.Y. JOOY (Date)
If signing on bel	nalf of an entity: ICHAEL L. TROP

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

(Typed or Printed Name)

X