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C LEWIS

COVER LETTER

TO: Amendment Section Division of Corporations

Name of Corporation

Name of Corporation

DOCUMENT NUMBER: 65-0696458

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:

Douglas K Andrews

Name of Contact Person

Alan International

Firm/Company

731 Lime Terrace

Address

Marco Island, Florida 34145

City/State and Zip Code

alanint@aol.com

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

For further information concerning this matter, please call:

Douglas K Andrews

305

588-9676

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

CR2E045 (03/12)

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

•	provisions of sections 607.0302, 617.0302, 607.1308, or 617.1308, Florida Statutes, inge is submitted for a corporation organized under the laws of the State of Florida	inis	_	
in orde	r to change its registered office or registered agent, or both, in the State of Florida.			
1. The name of t	he corporation: Alan International InC.			
2. The principal	office address: 10780 SW 130th. Avenue			
	orida, 33186			
	ddress (if different): 731 Lime Terrace			
4. Date of incorporation/qualification: 11/25/1996 Document number: 65-0696458		Pa	Palebol	
	street address of the current registered agent and registered office on file with the tment of State: (If resigned, enter resigned)			
	10780 SW 130th. Avenue	6	3.7.10 3.3.10	
	Miami, Florida 33186	FE8	22	
		8	32.	
6. The name and (if changed):	street address of the new registered agent (if changed) and /or registered office	PH 12: 5:	119980.450 1149 (- 13)	
	731 Lime Terrace	Ċ,	1 m	
	Marco Island, Florida 34145			
	P.O. Box NOT acceptable			
	ess of its registered office and the street address of the business office of its registered be identifical. Its authorized by resolution duly adopted by its board of directors or by an officer she board, or the corporation has been notified in writing of the change. Douglas K Andrews		ent,	
Signatu	re of an officer or director. Printed or typed name and title	-	_	
periormance of	the appointment as registered agent and agree to act in this capacity. to comply with the provisions of all statutes relative to the proper and complete my duities, and I am familiar with and accept the obligation of my position as regist document is being filed merely to reflect a change in the registered office address that the corporation has been notified in writing of this change.	istered ess, I		
Sig	nature of Registered Agent Date		-	
If signing on be	half of an entity:			
Т	ypêd or Printêd 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
CR2E045 (03/12)