## 96000090298

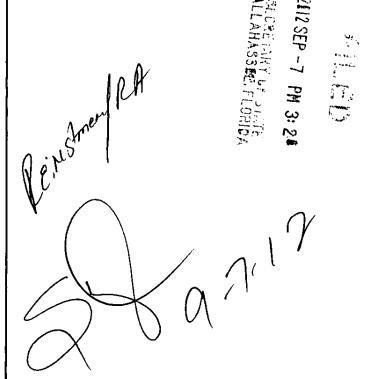
(Re	questor's Name)	
(Ad	dress)	
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(Cit	ty/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



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09/07/12--01018--003 \*\*635.00



## 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 Floriba
in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: Warren's Carpet Cleaning Inc.  2. The principal office address: 18 Knollwood Way
2. The principal office address: 18 Knollwood way
Fort Walton Beach FL 32548
3. The mailing address (if different):
4. Date of incorporation/qualification: 10-31-96 Document number: P9600009090
5. The name and street address of the current registered agent and registered office on file with the
Florida Department of State: (If resigned, enter resigned)
<u>resigned</u>
•
·
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
(u changed).
Warren E Rost
1/8 Cnollwood Way PO Box NOT acceptable
$\circ$
Fort Walton Boh FC 32548 "
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.
W- EN Warrer F Rust
Signature of an original or effective
l 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
performance of my duties, and I am faintifur 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.
Signature of Registered Agent 8-20-12  Date
If signing on behalf of an entity:
Typed or Printed Name

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