P97000191211

Requestor's Name

340 South WESTShore Blod. FAMPA, FLA. 33629

1 00002393531--2 -01/08/98--01028--004 *****35.00 *****35.00 Office Use Only

CORPORATION NAME(S)	& DOCUMENT NUMBER(S),	(if known):

1.	(Corporation Name)	(Docu	ment #)	
2	(Corporation Name)	(Docu	ment #)	
3	(Corporation Name)	(Docu	ment #)	
4	(Corporation Name)	(Docu	iment#)	•
Walk in	Pick up time		口 Certified Copy	-
Mail out	☐ Will wait	Photocopy	Certificate of Status	
		MUNTS		

	NEW FILINGS
	Profit
	NonProfit
1	Limited Liability
	Domestication
	Other

AMENDMENTS
Amendment
Resignation of R.A., Officer/Director
Change of Registered Agent
Dissolution/Withdrawal
Merger

OTHER FILINGS
Annual Report
Fictitious Name
Name Reservation

REGISTRATION/ QUALIFICATION
Foreign
Limited Partnership
Reinstatement
Trademark
Other

VS JAN 1 3 1998

RA Chg.

Examiner's Initials	

Florida Department of State, Sandra B. Mortham, Secretary of State

* * FILING FEE: \$35.00 * *

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

	rovisions of sections 607	10502 6170502 6	n7 1508. or 617.15	08, Florida Statu	tes, the
Pursiant to the p	rovisions of sections out	un laws of the State	of FLORITA	4	<i>9</i> € ∧,
undersigned corpo	oration organized under	ne laws of the State	ed office or registe	red agent, or both	is in they
	ing statement in order to				
State of Florida.	6))	- Marinto	of tall.	1439 4
1. The name of th	e corporation is:	IN SETTIAS	ONLIMITE	1,200	- 1/2 // // // // / // / // / / // / / /
	dress of the corporation i	e. 3401 Si	OUTH WESTSI	HORE BING.	
2. The mailing ad	dress of the corporation i	3. <u>0107</u>	F/A 22/20	~	·
		1 4111114,	FLA . 33629		100010121
3. Date of incorp	oration/qualification:	EC. 1, 1997	Document numb	per: pq^{-1}	00010121
4. The name and	address of the current reg	gistered agent and o	ffice:		* **
	40	a			
_	<u> </u>	<u>. </u>	,		
	1201	SOUTH H	Ayes STR.	<u>EE</u> T	
_	TALLI address of the new regis	AUASSES	FIA 3230	01_	_
= = = = = = = = = = = = = = = = = = =	l address of the new regis	tered agent and offi	ce: (P. O. Box Not	Acceptable)	
5. The name and					
-	DAVID	SM/TH_	41		-
	3401	SOUTH V	VESTSHORE	BLIP.	
•	TAM	PA, FLA. 33	629		
,	or interest offi	no and the street ad	dress of the busine	ess office of its re	gistered
The street addragent, as chang	ess of its registered officed, will be identical authorized by resoluthe board	Ce and the shoot do	in board of direct	ctors of by an off	icer so
Such change w	as authorized by resolu-	tion duly adopted t	y its board of dire		6-
authorized by	ne obashi	Karerla	2	2/28/	<u>ラフ</u>
X	of an officer, chairman or vice	chairman of the board)		(Date)	•
/ (Signature	Opan omeo, ondimen of		DOCIDENT		
	DAVID SA	1/1/1/	KESTPCIVI _	(Date)	
	(Printed or typed name	e and une)		it . There states	dita.
I further agree	to comply with the pro of my duties, and I am fa	visions of all sidill miliar with and ac	cept the obligation	of my position a	us.
registered age	if they countries, on your of and a	///	_	, ,	
ATI	7.1/8/2	of Inax	SICHENT 1	2/28/	<u> </u>
<u> </u>	(Signature of Registered Agent		(I	Date /	
If signing on bel	•		· 	0	3
II signing on ber	DAVID 5M/7	-H		PRESIDENT	
	(Typed or Printed Name)			(Capacity)	