9000035064

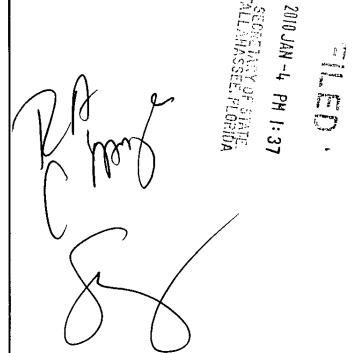
(Re	equestor's Name)	<u> </u>
. (Ad	ldress)	
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PICK-UP	☐ WAIT	MAIL
(Bu	ısiness Entity Nar	ne)
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
	Office Use On	nly

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COVER LETTER

TO: Amendment Section Division of Corporat	tions		
SUBJECT:	The Health Ma	I, Inc.	
	Name of Corp	oration	
DOCUMENT NUMBER:_	P9800	0035064	
The enclosed Statement of C	hange of Registered Office/A	gent and fee are submitte	ed for filing.
Please return all corresponde	ence concerning this matter to	the following:	
•	J	Ū	
	Daniel Baron, F	President	<u> </u>
	Name of Contac	et Person	
	The Condelide O	anna lan	
	The Cartolith G		<u></u>
	p		
	1728 Corpora	te Drive	
	Address		
	Boynton Beach, City/State and Z	FL 33426	<u></u>
	City/State and Z	Cip Code	
	dan@cartolith	n.com	
E-mail a	ddress: (to be used for futur		ation)
For further information conc	erning this matter, please call:		
Daniel Baro	n, President	at (561) Area Code & Daytim	369-4200
Name of Con	tact Person	Area Code & Daytim	e Telephone Number
Enclosed is a \$35.00 check n	nade payable to the Departme	nt of State.	
Am Div	ling Address: endment Section ision of Corporations . Box 6327	Street Address: Amendment Section of Corp Clifton Building	oorations

Tallahassee, FL 32314

2661 Executive Center Circle

Tallahassee, FL 32301

TO:

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 Florida in order to change its registered office or registered agent, or both, in the State of Florida.	
1. The name of the corporation: The Health Mall, Inc.	
2. The principal office address: 1728 Corporate Drive	
Boynton Beach, FL 33426	
3. The mailing address (if different): 1728 Corporate Drive	
Boynton Beach, FL 33426	
4. Date of incorporation/qualification: April 17, 1998 Document number: P98000035064	
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)	
Thomas Cochrane	
2801 Exchange Ct	
West Palm Beach, FL 33409	
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):	
Daniel Baron	
Daniel Baron 1728 Corporate Drive P.O. Roy, NOT acceptable	1
P.O. Box NOT acceptable	ZM Na
Boynton Beach, FL 33426	
The street address of its registered office and the street address of the business office of its registered agentials 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.	
Daniel Baron, President Signature of an officer or director 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 I am familiar 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.	
December 1, 2009 Signature of Registered Agent Date	
If signing on behalf of an entity:	
Typed or Printed Name	

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