## P9800044410

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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SECRETARY OF STATE
AHASSEE, FLORID

B7/14/00

## **COVER LETTER**

Division of Corporations
SUBJECT: Alternative Resource Services Inc. (Name of Corporation)
DOCUMENT NUMBER: P 980000 44410
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:
Lenny SILVESTRI (Name of Contact Person)
Alternative Resource Services Drc (Firm/Company)
1341 W. Palmetto Park Rd
Bora Raton, Fr 33486 (City/State and Zip Code)
For further information concerning this matter, please call:
Lenny Siculstri at (561) 395-4264 (Area Code & Daytime Telephone Number)
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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

of Corporations
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Street Address: Amendment Section

TO:

Amendment Section

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

statement of change is submitted for a corporation organized under the laws of the State ofin order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: Alternative Resource Services Dic
2. The principal office address: 1341 W- Palmetto Park Rd
3. The mailing address (if different):
4. Date of incorporation/qualification: 5-14-98 Document number: P98000044410
-5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
Leonard Silvistri
80 SW 19 AW
Boca Karon, 72 33486 25 5 17
The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Leonard Silvestri
- 13 mg NOT marriables  12 0 0 0 Party > 10 3348(0-
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.
(Signature of an officer or director)  Lean and Situation  (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.
(Signature of Registered Agent) (Date)
If signing on behalf of an entity:
hearand Silvestei (Typed or Printed Name)

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