P98000104325

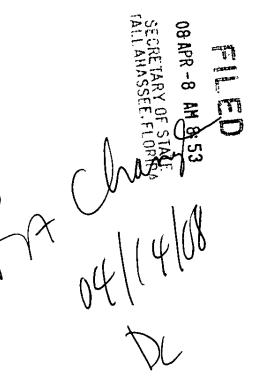
(Requestor's Name)
(Address)
(Address)
(realisas)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Certificates of Status
Special Instructions to Filing Officer:





200122426632

04/08/08--01019--009 ++35.00



COVER LETTER

Division of Corporations
SUBJECT: Gay Places 2 Stay, Inc (Name of Corporation)
DOCUMENT NUMBER: P98000104325
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:
Samir Kaluf (Name of Contact Person)
Gay Places 2 Stay, Inc
(Firm/Company)
500 NE 19th Street
(Address)
Wilton Manors, FL 33305
(City/State and Zip Code)
For further information concerning this matter, please call:
Mary M. Earnest at (954) 525-5644 (Name of Contact Person) (Area Code & Daytime Telephone Number)
(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

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

statement of change is submitted for a corpo	502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this oration organized under the laws of the State of Florida	
in order to change its registered of	fice or registered agent, or both, in the State of Florida.	
1. The name of the corporation: Gay Place	es 2 Stay, Inc.	
2. The principal office address: 500 NE 19th Street, Wilton Manors, FL 33305		
3. The mailing address (if different):		
4. Date of incorporation/qualification: 12/1	4/1998 Document number: 98000104325	
5. The name and street address of the current Florida Department of State:	nt registered agent and registered office on file with the	
Charles T. Berube		
1717 NE 17th Way		
Fort Lauderdale, FL 3	3305	
6. The name and street address of the new re (if changed):	egistered agent (if changed) and /or registered office 7	
Samir Kaluf	mo R M	
500 NE 19th Street	STAL SES	
	(NOT acceptable)	
Wilton Manors, FL 33		
The street address of its registered office a as changed will be identical.	nd the street address of the business office of its registered agent,	
Such change was authorized by resolution authorized by the board or the corporation	duly adopted by its board of directors or by an officer so has been notified in writing of the change.	
	SAMIK KALUF (Printed or typed name and title)	
(Signature of an officer or director) I hereby accept the appointment as registed in the provision of my duties, and I am familiar with and a document is being filed merely to reflect a corporation has been notified in writing of	ered agent and agree to act in this capacity. The statutes relative to the proper and complete performance occept the obligation of my position as registered agent. Or, if this change in the registered office address, I hereby confirm that the	
Moly	3/27/2008	
(Signature of Registered Agent)	(Date)	
If signing on behalf of an entity:		
SAMIR KACUF (Typed or Printed 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