

999000030652

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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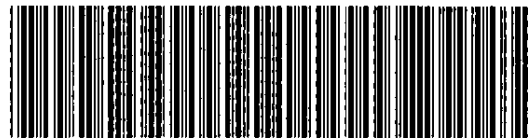
(Business Entity Name)

(Document Number)

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TALLAHASSEE FLORIDA

*RMW
7/2/10*

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: BOCA CLOSET DESIGN INC
Name of Corporation

DOCUMENT NUMBER: P99000030652

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:

Herbert Dusowitz
Name of Contact Person

BOCA CLOSET DESIGN INC
Firm/Company

9132 Cove Point Circle
Address

Boynton Beach, FL 33472
City/State and Zip Code

herb dusowitz @ bell South Net
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Herbert Dusowitz at (561) 702-0306
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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 28, 2010

HERBERT DUSOWITZ
9132 COVE POINT CIRCLE
BOYNTON BEACH, FL 33472

SUBJECT: BOCA CLOSET DESIGN, INC.
Ref. Number: P99000030652

We have received your document for BOCA CLOSET DESIGN, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A change of registered agent/registered office form cannot be used solely to make a change in the principal/mailling address of the corporation. The change, however, has been noted on our data base.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6916.

Carol Mustain
Regulatory Specialist II

Letter Number: 410A00015795

**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: BOCA CLOSET DESIGN, INC.
2. The principal office address: 9132 COVE POINT CIRCLE
BOYNTON BEACH FL 33472
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 1999 Document number: P99000030652
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)

Herbert Dusowitz
380 N.W. 42 ST
BOCA RATON FL 33432

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Herbert Dusowitz
9132 COVE POINT CIRCLE
BOYNTON BEACH FL 33472

P.O. Box NOT acceptable

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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.

Herbert Dusowitz
Signature of an officer or director

Herbert Dusowitz PRES.
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.

Herbert Dusowitz
Signature of Registered Agent

6/21/10
Date

If signing on behalf of an entity:

Typed or Printed Name

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