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((Requestor's Name)	
	(Address)	
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	(City/State/Zip/Phone #)	
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PICK-UP		
((Business Entity Name)	
((Document Number)	
Certified Copies	Certificates of Status	<u> </u>
Special Instructions	to Filing Officer:	
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09/02/03-01031-011 **35.00



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TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations

BVL DRY CLEANERS, INC. SUBJECT (Name of corporation) ł °9900008 12 **DOCUMENT NUMBER:**

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:

-(Name of nerson) ame of firm/company (City/state and zip code) For further information concerning this matter, please call:

сл

(Area code & daytime telephone number) (Name of person

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: Aniendment Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399

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: BVL DRY CLEANERS, INC.

2. The principal office address: 2545 BOGGY CREEK ROAD, KISSIMMEE, FLORIDA 34744

642 Bluevill 3. The mailing address (if different);

4. Date of incorporation/gualification: 09/30/99

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

JAYSHREE M. SOLAY

5428 BAY LAGOON CIR

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): $\bigwedge \bigcap \bigcap (A \cap A)$

centable

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, chairman or vice chairman of the board)

(Printed or typed name and title)

(Date)

(Capacity)

Document number:

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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. Thereby confirm that the corporation has been notified in writing of this change.

(Signature of Registered Agent) If signing on behalf of an entity:

(Typed or Printed Name)

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE AND MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314