P99000095502

(Re	questor's Name)	
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(Cit	ty/State/Zip/Phone	a #1)
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SEURETARY OF STATE ALLAHASSEE, FLORID,

R.A.

L.TI

DEC - 8 2009

COVER LETTER

SUBJECT:	Lazaan Investm		·	
	Name of Co	rporation		
DOCUMENT NUMBER:	P990	00095502		
The enclosed Statement of Char	nge of Registered Office	Agent and fee are sub-	mitted for filing.	
Please return all correspondence	e concerning this matter	to the following:		
	LeeAnn (Carson		
	Name of Con			
	Lazaan Inves			
	Firm/Cor	mpany		
	2110 N. Donnelly S			
	Addre	€SS		
	Mt. Dora, F	L 32757		
City/State and Zip Code				
	lazaan@a	ol.com		
E-mail address: (to be used for future annual report notification)				
For further information concern	ing this matter, please ca	úl:		
LeeAnn C		at (352)	508-4381 ytime Telephone Number	
Name of Contac	t Person	Area Code & Da	ytime Telephone Number	
Enclosed is a \$35.00 check made	le payable to the Departn	nent of State.		
<u>Mailin</u> Amen	g Address: Iment Section	Street Addre Amendment		
	on of Corporations		Corporations	
	Sox 6327	Clifton Buil	_	
Tallah	assee, FL 32314	2661 Execut Tallahassee,	tive Center Circle FL 32301	

TO:

Amendment Section Division of Corporations

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

statement of cha	e provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this cange is submitted for a corporation organized under the laws of the State of Florida ler to change its registered office or registered agent, or both, in the State of Florida.	_
1. The name of t	the corporation: Lazaan Investments, Inc.	
2. The principal	office address: 2110 N. Donnelly Street, Suite 108	
Mt. Dora, F		
3. The mailing a	address (if different):	
4. Date of incorp	rporation/qualification: 10/29/1999 Document number: P99000095502	2
	nd street address of the current registered agent and registered office on file with the artment of State: (If resigned, enter resigned)	
	Mark Carson	
	24525 CR 44A	
	Eustis, FL 32736	The second
6. The name and (if changed):	and street address of the new registered agent (if changed) and /or registered office and street address of the new registered agent (if changed) and /or registered office and a street address of the new registered agent (if changed) and /or registered office and a street address of the new registered agent (if changed) and /or registered office and a street address of the new registered agent (if changed) and /or registered office and a street address of the new registered agent (if changed) and /or registered office and a street address of the new registered agent (if changed) and /or registered office and a street address of the new registered agent (if changed) and /or registered office and a street address of the new registered agent (if changed) and /or registered office and a street address of the new registered agent (if changed) and /or registered office and a street address of the new registered agent (if changed) and /or registered office and a street address of the new registered agent (if changed) and /or registered agent (if changed) and /or registered agent (if changed) are registered agent (if changed) and /or registered agent (if changed) and /or registered agent (if changed) and /or registered agent (if changed) are registered agent (if changed) and /or registered agent (if changed) are regist	
	Mark Carson 2110 N. Donnelly Street, Suite 108	(m)
	2110 N. Donnelly Street, Suite 108	
	P.O. Box NOT acceptable	
	Mt. Dora, FL 32757	
The street addre as changed will	ress of its registered office and the street address of the business office of its registered ager Il be identical.	nt,
Such change wa	vas authorized by resolution duly adopted by its board of directors or by an officer so the board, or the corporation has been notified in writing of the change.	
Ma	Mark Carson Director	_
-	ure of an officer or director Printed or typed name and title	
I hereby accept I further agree t of my duties, an document is beil corporation has	of the appointment as registered agent and agree to act in this capacity. It to comply with the provisions of all statutes relative to the proper and complete performaning I am familiar with and accept the obligation of my position as registered agent. Or, if the infilial merely to reflect a change in the registered office address, I hereby confirm that the sent of the invertigation of this change.	nce his he
M M	ignature of Registered Agent Date	-
If signing on bel	ehalf of an entity:	
LAZAAN	1 luvestments, Inc	

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

Typed or Printed Name