506088

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Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1.	(Corporation Name)	(Document #)	- 3 - 2% & A
2	(Corporation Name)	(Document #)	THE RESERVE
3	(Corporation Name)	(Document #)	SEC. 4
4	(Corporation Name)	(Document #)	- OBJECT
☐ Walk in ☐ Mail out	Pick up time Will wait	Certified C	

	NEW FILINGS
	Profit
	NonProfit
	Limited Liability
	Domestication
-"	Other

AMENDMENTS
Amendment
Resignation of R.A., Officer/Director
Change of Registered Agent
Dissolution/Withdrawal
Merger

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OTHER FILINGS
Annual Report
Fictitious Name
Name Reservation

REGISTRATION/
Foreign
Limited Partnership
Reinstatement
Trademark
Other

QA Chq.

MAY 6 1999

Examiner's Initials



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

Pursuant to the provisions of section 607.0502 or 607.1508, Florida Statutes, the undersigned corporation organized under the laws of the State of Florida, submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1.	The name of the corporat	ion is: Boesch l	Enterprises, Inc.	- .	<u>=</u>	
la.	Date of incorporation:	10/11/90	Document Nu	mber: S06088	÷ ,,,	- *•
2.	2536.	THER L. DOU	DNA vd., Sixth Floor	office:		30
3.	The name and address of R. Ma 2536	the new registe aury Thornton	ered agent and off	ice:	— · · · · · · · · · · · · · · · · · · ·	Ę
reg Suc	e street address of its reg istered agent, as changed, th change was authorized cer so authorized by the B	istered agent a will be identica by resolution	nd the street add			
			By: Title: Date	Boesch, 6,1999	President	-

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, 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.

Name:

Date