516985

(Requestor's Name)							
(Address)							
(Address)							
(City/State/Zip/Phone #)							
PICK-UP WAIT MAIL							
(Business Entity Name)							
(Document Number)							
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COVER LETTER

то:	Amendment S Division of C							
SUBJECT: ALTAMONTE BAY HOLDINGS, INC. Name of Corporation								
		Name of	Corporation					
DOCU	MENT NUM	BER:	S16985					
The en	closed Stateme	nt of Change of Registered Of	fice/Agent and fee a	are submitted for filing.				
Please	return all corre	spondence concerning this mat	ter to the following	;				
			_					
		Ruth	E. Cook					
			Contact Person					
	_		ay Holdings, Inc	<u>. </u>				
		r irm/	Company					
		024 Villaga Baut	overd Cuite OOE	260				
	_	931 Village Bould A	ddress	-209				
		West Palm E	Beach, FL 33409					
		City/State	Beach, FL 33409 and Zip Code					
		rcook@	awdc.net					
	E-	mail address: (to be used fo		port notification)				
For fur	ther informatio	n concerning this matter, pleas	e call:					
	-	Node E. Coole	504					
		Ruth E. Cook of Contact Person	at (501 Area Code) 684-2227 e & Daytime Telephone Number				
Enclos	ed is a \$35.00 o	check made payable to the Dep	artment of State.					
		Mailing Address: Amendment Section	Street Amen	Address: dment Section				
		Division of Corporations		on of Corporations				
		P.O. Box 6327		n Building				
		Tallahassee, FL 32314		Executive Center Circle				
			Tallah	assee, FL 32301				

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

statement of cha	inge is submitted for a co	prporation organize	507.1508, or 617.1508, Flori d under the laws of the State d agent, or both, in the State	of Florida
	•		HOLDINGS, INC.	
2. The principal	office address: 931 Vil	laige Boulevard	, Suite 905-269	
	West F	Palm Beach, FL	33409	
3. The mailing a	ddress (if different):			
4. Date of incorp	ooration/qualification:	12/07/1990	Document number:	S16985
	I street address of the cur tment of State: (If resign		t and registered office on file	e with the
	Michael R. Lang		····	
	TAL SE			
	West Palm Beach,	FL 33409		ER SEP
6. The name and (if changed):	I street address of the new	w registered agent (i	f changed) and /or registered	-3 PH 4: 31 HASSEE, FLOR
	John t. Metzger, E	sq.		- STA STA
	505 S. Flagler, 3rd	Floor P.O. Box NOT ac		
	West Palm Beach,		ceptable	
	ess of its registered office be identical.	ce and the street add	dress of the business office	
Such change was authorized by the	as authorized by resolut ne board, or the corpora	ion duly adopted by tion has been notifi	y its board of directors or by ed in writing of the change	y an officer so ·
Signatu	re of an officer or director		Michael R. Lang	, President
	the appointment as reg to comply with the prov d I am familiar with an ng filed merely to reflect bow notified in writing nature of Registered Again that of an entity:	istered agent and a isions of all statute d accept the obliga et a change in the r g of this change.	gree to act in this capacity. s relative to the proper and tion of my position as regis egistered office address, I h Date	complete performance tered agent. Or, if this ereby confirm that the
Т	yped or Printed Name			

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