Requester's Name 17420 U.S. Hu Address LU/State/Zip Lutz, Address Lutz,	M 66 73 4 Inc. 14 4 / Nock	000046088079: -09/24/0101117007 ******35.00 ******35.00
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CORPORATION NAME(S) & DO	JCUMENT NUMBER(S), (if kn	own):
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NEW FILINGS	<u>AMENDMENTS</u>	OF ST.
Profit Not for Profit Limited Liability Domestication Other	Amendment Resignation of R.A., Change of Registered Dissolution/Withdra Merger	Officer/Director
OTHER FILINGS	REGISTRATION/QUA	LIFICATION W. C. T. J.
Annual Report Fictitious Name	Foreign Limited Partnership Reinstatement Trademark Other	nelwin the one of
CR2E031(7/97)		Examiner's Initials

- -- 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, 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 corporation: Mac's Printery, Inc.
2. The mailing address of the corporation: 17420, Suite 108 US Highway 41, N.,
Lutz, FL 33549
3. Date of incorporation/qualification: 01/10/1988 Document number: M66737
4. The name and address of the current registered agent and office:
Neil II. McLaughlan
Lutz, FL 33549
5. The name and address of the new registered agent (if changed) and/or registered office (if changed):
Nelwyn M. McLaughlan 受益 2
17420, Suite 108, US Highway 41, N
Lutz, FL 33549
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.
(Signature of an officer, chairman or vice chairman of the Mord) (Daite)
Nelwyn M. McLaughlan, President
Having been named as registered agent and to accept service of process for the above stated corporation, 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.
Meley M. M. Hayblan 9-1-200/ (Signatul of Registered Agent) (Date)
If signing on behalf of an entity: Netwyn M. McLaugh Capacity)
* * * FILING FEE: \$35.00 * * *

CR2E045(9/00)

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