## P08000058177

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## **COVER LETTER**

Amendment Section Division of Corporations

TO:

	ŧ			
SUBJECT: Change of Registered Agent (Name of Co	rnoration)			
(i taine of co	· porumon)			
DOCUMENT NUMBER: P08000058177				
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:			
Mitchell	Grafton			
(Name of Con	tact Person)			
Grafton Art	Studio INC.			
(Cultivity)	···			
	kory Ave.			
(Addre	ess)			
	7.			
Panama City, FL 32405				
(City/State and	d Zip Code)			
For further information concerning this matter, please ca	all:			
Mitchell Grafton	at ( <u>850</u> ) <u>215 2530</u> (Area Code & Daytime Telephone Number)			
(Name of Contact Person)	(Area Code & Daytime Telephone Number)			
Enclosed is a \$35.00 check made payable to the Departm	nent of State.			
Mailing Address:	Street Address:			
Amendment Section	Amendment Section			
Division of Corporations	Division of Corporations			
P.O. Box 6327 Tallahassee, FL 32314	Clifton Building 2661 Executive Center Circle			

Tallahassee, FL 32301

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statu inge is submitted for a corporation organized under the laws of the State of Flori or to change its registered office or registered agent, or both, in the State of Florid	da		
1. The name of	the corporation: Grafton Art Studio Inc.			
2. The principal	office address: 1901 Hickory Ave. Panama City, FL 32405			
3. The mailing a	address (if different): Same		·	
4. Date of incorp	poration/qualification: June 13, 2008 Document number: P08000058	3177		
	I street address of the current registered agent and registered office on file with the rtment of State: (If resigned, enter resigned)	•		
	Business Filings Inc.	AE SE	09	
	1203 Governors Square Blvd., Suite 101	LAH) CRET	JAN	П
	Tallahassee, FL 32301-2960	ASSE ASSE	2	F
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered office	OF STATI E, FLORID	PM 12: 35	ED
	Mitchell Grafton	≶'''	Ų,	
	1901 Hickory Ave.  (P.O. Box NOT acceptable)			
	Panama City, FL 32405			
The street addre	ess of its registered office and the street address of the business office of its reg	sistered a	ıgent,	
Such change wa authorized by the	as authorized by resolution duly adopted by its board of directors or by an office board, or the corporation has been notified in writing of the change.	cer so		
Attell	Mitchell Grafton use or an officer or director)  (Printed or typed name and title)	·		
I hereby accept I further agree of my duties, an document is bet corporation has	the appointment as registered agent and agree to act in this capacity.  to comply with the provisions of all statutes relative to the proper and complet  id I am familiar with and accept the obligation of my position as registered ag-  ing filed merely to reflect a change in the registered office address, I hereby co  s been notified in writing of this change.	e perfori ent. Or, onfirm th	nance if this at the	3
_ Mittel	1/2/09			
	gnature of Registered Agent) (Date)			
	Mitchell Grafton Typed or Printed Name)			

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (8/05)