08000105316

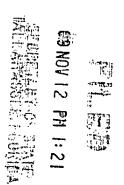
(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Name) ;
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Certified Copies	_: Certificates o	of Status
Special Instructions to	Filing Officer:	
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R-A. Chonze C.COULLIETTE

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EXAMINER

COVER LETTER

TO: Amendment Section Division of Corporati	ons		
SUBJECT:	Teed Off Publis Name of Co	hing, Inc.	
DOCUMENT NUMBER:	P080	00105316	
The enclosed Statement of Ch	nange of Registered Office	Agent and fee are subm	itted for filing.
Please return all corresponder	nce concerning this matter	to the following:	
	Diana Cho	owdhury	
	Name of Con	tact Person	· · · · · · · · · · · · · · · · · · ·
	Teed Off Pub	lishina Inc	
	Firm/Cor		
	851 SE 6th Av		
	Addr	ess	
	Delray Beach City/State and	, FL. 33483 Zip Code	
	·	-	
C mail a	amiposters@y ddress: (to be used for fu	/ahoo.com	fication
E-man ac	idress; (to be used for fu	ture annual report nou	(incation)
For further information conce	rning this matter, please ca	all:	
Steven Ril	oushofski	at (203)	531-7731
Name of Cont		Area Code & Dayt	531-7731 ime Telephone Number
Enclosed is a \$35.00 check m	ade payable to the Departr	nent of State.	
Ame Divi P.O.	ing Address: endment Section sion of Corporations Box 6327 ahassee, FL 32314		Section orporations ing ve Center Circle
		Tallahassee, I	TL 32301

TO:

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, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: Teed Off Publishing, Inc.
2. The principal office address: 851 SE 6th Ave., Suite 103 Delray Beach, FL. 33483
3. The mailing address (if different):
4. Date of incorporation/qualification: Dec 02, 2008 Document number: P08000105316
The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)
Ronald Strout
502 NW 8th Court
Boynton Beach, FL. 33426
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Diana Chowdhury
502 NW 8th Court \$2
P.O. Box NOT acceptable
Boynton Beach, FL. 33426
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, or the corporation has been notified in writing of the change.
Signature of an officer or director Steven G- Ribushotsky
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. Or, if this document is being filed megely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.
Signature of Registered Agent Date
If signing on behalf of an entity:
Teed Off Publishing, Inc. Typed or Printed Name

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