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Amendment Section Division of Corporations

Party Antics, Inc.

Name of Corporation

04000003608

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:

Jeffrey Goldklank

Party Antics, Inc.

3917 Northwest 126th Avenue

Coral Springs, Florida 33065
City/State and Zip Code

Jeff.Gold@ZazzEvents.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jeffrey Goldklank

Name of Contact Person

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address:

Amendment Section **Division of Corporations** Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

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

statement of ch	ange is submitted for a corporation	17.0502, 607.1508, or 617.1508, Florida Statutes, this organized under the laws of the State of Florida	
	the corporation: Party Antics	registered agent, or both, in the State of Florida.	
2. The principa	I office address: 3917 Northwe	est 126th Avenue, Coral Springs, Florida 33	065
3. The mailing	address (if different):		
4. Date of incor	poration/qualification: 12/26/2	003 Document number: P0400003608	
5. The name an		tered agent and registered office on file with the	
	Glenn Goldklank, 3917 Northwest 1	26th Avenue, Coral Springs, Florida 33065	
	Resigned		
			क्री
6. The name an (if changed):	_	ed agent (if changed) and /or registered office	15 JUN 15
	Jeffrey Goldklank	· 	-P
	3917 Northwest 126th		PH 12: L
	Coral Springs, Florida	Box NOT acceptable 33065	64
The street addr		street address of the business office of its registered agent,	
Such change wauthorized by t	as authorized by resolution duly a he board or the corporation has be	dopted by its board of directors or by an officer so een notified in writing of the change.	
3/A	ye of an officer or director	Jeffrey Goldklank, President	
I further agree performance o agent. Or, if th	to comply with the provisions of a	ent and agree to act in this capacity. ull statutes relative to the proper and complete and accept the obligation of my position as registered to reflect a change in the registered office address, I uified in writing of this change.	
	Same	June 3, 2015	
(ehalf of an entity:	Date	
Party Anti	•		
	Typed or Printed Name		

Make Checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 CR2E045 (03/12)

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