## 448498 estor's Name

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SUITE 400 319 CLEM	CE URRELL, P.A. COMEAU BUILDING ATIS STREET M BEACH, FLORIDA 33401 IE #		Office Use On	ly
CORPORATION	NAME(S) & DOCUM	IENT NUMBER	(S), (if known):	<u> </u>
1(Con	poration Name)	(Documen	nt #)	
2(Con	poration Name)	(Documen	ıt #)	
3(Con	poration Name)	(Documen	n #)	<del></del>
4(Co	poration Name)	(Documen	nt #)	
Walk in	Pick up time		Certified Copy	
Mail out			Certificate of Status	s
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Limited Liability	Change of Register	<del>·</del>	_	
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Other

Examiner's Initials

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Florida Department of State, Sandra B. Mortham, Secretary of State

## 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 1a. The name of the corporation is: \_\_Florida Craft Wholesale, Inc. C/O L. D. Murrell 1b. The mailing address of the corporation is: 319 Clematis Street Suite 400, Comeau Building West Palm Beach, FL 1c. Date of incorporation: 5/2/74 \_Document number: 448498 The name and address of the current registered agent and office: Brian E. Muir 300 Prosperity Farms Road North Palm Beach, FL 33408 3. The name and address of the new registered agent and office: (P.O. Box Not Acceptable) Murrell 319 Clematis Street Suite 400. Comeau Building West Palm Beach, FL 33401 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 board) <u>Brian E. Muir, Pres</u>ident (Printed or typed name and title) Having been named as registered agent and to accept service of process for the above stated corporation, I hereby accept the appointmentas registered agent and agree to actin this capacity, performance of my duties, and I am familiar with and accept the obligation of my position as (Signature of Registered Agent) If signing on behalf of an entity: L.D. Murrell (Typed or Printed Name)

Division of Corporations, P.O. Roy 6327, Tallahusson, El. 3224

(Capacity)