F000000066444

(Re	equestor's Name)	_
(Ac	ldress)	
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PICK-UP	☐ WAIT	MAIL
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FILED STORE TARY OF STAFE NYISION OF CORPORATION.

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C LEWIS

COVER LETTER

TO: Amendme Division o	nt Section f Corporations	·
SUBJECT: STORECRAFTERS, INC.		S, INC.
	Name of Corp	oration
DOCUMENT NU	MBER: F00000006644	
The enclosed State	ement of Change of Registered Office/A	gent and fee are submitted for filing.
Please return all co	orrespondence concerning this matter to	the following:
	Steven Pick Name of Conta	ett
-	Name of Conta	ct Person
	DoMyLLC.co	m, LLC
	Firm/Com	pany
	5716 Corsa Ave	Suite 110
-	Addres	S
	Weetleke Village	CA 01363
	Westlake Village City/State and J	
-	E-mail address: (to be used for futu	are annual report notification)
	E-man address. (to be used for futt	ne annual report notification)
	•	
For further inform	ation concerning this matter, please cal	l:
Steven Pickett	on behalf of Incom Services, Inc.	at (888) 366-9552
- Na	me of Contact Person	at (888) 366-9552 Area Code & Daytime Telephone Number
District to page	00 -11 d tid- 4- 4b - D	
Enclosed is a \$35.	00 check made payable to the Departm	ent of State.
	Malling Address.	Street Address
	Mailing Address: Amendment Section	Street Address: Amendment Section
	Division of Corporations	Division of Corporations
	P.O. Box 6327	Clifton Building
	Tallahassee, FL 32314	2661 Executive Center Circle
		Tallahassee, FL 32301

CR2E045 (03/12)

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 New York in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: STORECRAFTERS, INC.
2. The principal office address:
3. The mailing address (if different):
4. Date of incorporation/qualification: 11/27/2000 Document number: F00000006644
5. 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)
CORPORATION SERVICE COMPANY
1201 Hays St
Tallahassee, FL 32301
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
InCorp Services, Inc.
17888 67th Court North 29
P O Box NOT acceptable Loxahatchee, FL 33470
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.
Mark A. White, President Signature of an officer or director Printed or typed name and little
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. On if this document is being filed merely to reflect a change in the registered office address, I hereby confirmfinat the corporation has been notified in writing of this change.
July 16, 2016
If signing on behalf of an entity:
Steven Pickett on behalf of Incorp Services, Inc. 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 * * *