

Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

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REGISTERED AGENT CHANGE CRAFTCROSWELL, INC.

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Electronic Filing Menu

Corporate Filing Menu

CR2E045 (8/05)

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 Mississippi in order to change its registered office or registered agent, or both. In the State of Florida.		
1. The name of the corporation: CRAFTCROSWELL, INC.		
The principal office address: 116 Ridgeland Plaza Ridgeland, MS 39157		
3. The mailing address (if different):		
4. Date of incorporation/qualification: Aug 23, 2007 Document number: F07000004252	<u> </u>	
 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) 		
CT Corporation System		
1200 South Pine Island Road		14
Plantation, Florida 33324	72	SIA
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed);	JAN IT	"YISION OF CORPORAT
National Corporate Research, Ltd., Inc.	A	3
155 Office Plaza Drive,	.⊒E	E.C.
The state of the s	න න	
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.	- 5	120
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 Milliam U. Cresvell - Sentitory Fraud or types name and title		
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 merely 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 Drate		
If signing on behalf of an entity: Lucy Dawson		
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

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