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ALL ARASSEE OF LORIDA

T SCHROEDET

COVER LETTER

SUBJECT: Global Purchasing Necessities, /nc Name of Corporation
DOCUMENT NUMBER: # 15 00 00 00 7 43
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:
Harvey Scholl Name of Contact Person
Name of Contact Person
21346 S+ Andrews BlvJ Address
Boca Roton FL 33433 City/State and Zip Code
HSCHOLL @SCHOLLPARTNERS. 6 E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Contact Person at Sol 445 8000 Area Code & Daytime Telephone Number
Enclosed is a \$35.00 check made payable to the Department of State.

Street Address: Amendment Section

Clifton Building

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Mailing Address: Amendment Section

P.O. Box 6327

Division of Corporations

Tallahassee, FL 32314

CR2E045 (03/12)

TO:

Amendment Section Division of Corporations

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 in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: Global Purchasing Necessities, Inc
2. The principal office address: 21346 St Andrews Blud
Boca Raton FC 33433
3. The mailing address (if different):
4. Date of incorporation/qualification: 4,1998 Document number: F150000007
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 Street
Tallahasse FL 32301
6. The name and street address of the new registered agent (if changed) and/or registered office? Harvey Scholl 21346 St. Andrews Blvd Boca Raten FL 33433
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. Signuate of an officer or director Signuate of an officer or director Printed or typed 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 Date
If signing on behalf of an entity: Har Vey Scho // Typed of 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