H35481

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
·

Office Use Only



300214622773

12/06/11--01004--002 **35.00

Lo Chy

14 DEC -6 PM 12: 5

Jn 12-7-1.

COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: GALLOWAY OF	FICE SUPPLY, INC.
DOCUMENT NUMBER:	H35481
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:
EDWIN E	B. ZASLOW, ESQ. of Contact Person
	EDWIN B. ZASLOW, P.L.
17071 WES	ST DIXIE HIGHWAY Address
NORTH MIAMI City/St	BEACH, FL 33160-3773ate and Zip Code
	V@MINDSPRING.COM for future annual report notification)
For further information concerning this matter, ple	ease call:
EDWIN B. ZASLOW	at (786) 454-8827 Area Code & Daytime Telephone Number
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a \$35.00 check made payable to the D	Department of State.
Mailing Address: Amendment Section Division of Corporation 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 char	nge is submitted for a co	rporation organized	507.1508 , or 617.1508 , Florida Sidunder the laws of the State of $\frac{F}{F}$	LORIDA		
1. The name of the	ne corporation: GALL	OWAY OFFIC	CE SUPPLY, INC.			
2. The principal of	office address: 10201 I	NW 21 STREET	T, MIAMI, FL 33172			
3. The mailing ac	ddress (if different):					
4. Date of incorp	oration/qualification:	12/21/1984	Document number:	H35481		
	street address of the curr ment of State: (If resigne		t and registered office on file with	THE STATE OF THE S		
	EDWIN B. ZASLOW, ESQ.					
	801 N.E. 167th Street, Suite 200					
	North Miami Beach	, FL 33162				
6. The name and (if changed):	street address of the new	registered agent (if	f changed) and /or registered office	ee .		
	EDWIN B. ZASLOV	V, ESQ.				
	17071 WEST DIXIE					
	North Miami Beach	P.O. Box NOT acc	eptable			
-			leage of the business offer of its			
•			ress of the business office of its			
Such change was authorized by the	authorized by resolution board, or the corporation	on duly adopted by on has been notifie	its board of directors or by an odd in writing of the change.	officer so		
Signature	of an object or director		JAIME TOURAL, PRE	SIDENT		
I hereby accept t. I further agree to of my duties, and document is bein corporation has	he appointment as regis comply with the provis I am familiar with and g filed merely to reflect been notified in writing	stered agent and ag sions of all statutes accept the obligat a change in the re of this shange.	gree to act in this capacity. relative to the proper and comp ion of my position as registered gistered office address, I hereby			
Sign	iture of Registered Agent	1	///17/20	0//		
If signing on beh	, <u>, , , , , , , , , , , , , , , , , , </u>		/ Date 4			
Ģ <u> </u>	· · · · · · · · · · · · · · · · · · ·					
Тур	ed 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 CR2E045 (8/05)