## H89427

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SECRETARY OF STATE
TALLAHAS SEE FLORIDA

FEB 2 8 2012 T. ROBERTS

## **COVER LETTER**

Division of Corporations						
SUBJECT: Stereotypes, Inc.						
Name of Corporation						
DOCUMENT NUMBER: H89428						
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:						
Carlos N. Gonzalez						
Carlos N. Gonzalez Name of Contact Person						
Steretypes, Inc.						
Firm/Company						
550 N. Nova Road						
Address						
Daytona Beach, FL 32114						
City/State and Zip Code						
Stereotypes a msn. com E-mail address: (to be used for future annual report notification)						
E-mail address: (to be used for future annual report notification)						
$\cdot$						
For further information concerning this matter, please call:						
Carlos N. Gonzalez  Name of Contact Person  at (386) 2/2-2350  Area Code & Daytime Telephone Number						
Name of Contact Person at ( 366 ) 2/2-25 Area Code & Daytime Telephone Number						
Enclosed is a \$35.00 check made payable to the Department of State.						

Mailing Address: Amendment Section **Division of Corporations** P.O. Box 6327

Tallahassee, FL 32314

Street Address: Amendment Section **Division of Corporations** Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

July 1880

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

-	•	ns 607.0302, 617.0302 · a corporation organi		*	
in order	to change its regis	stered office or registe	red agent, or both,	in the State of I	Florida.
1. The name of th	ne corporation:	Stereotypes,	Inc.		
2. The principal of	office address:	550 N. Nova F	Road, Daytona	Beach, FL	- 32114
3. The mailing ad	dress (if different):	Same	100 mm 400 mm		
4. Date of incorpo	oration/qualification	n: 12/11/1985	Document nu	mber: <u>H894</u>	28
		e current registered ag esigned, enter resigned		office on file wi	th the
_	Carlos	M. Gonzalez			
_	127 Mu	wheld Dr		•	
-	Dayton	a Beach, FL 32	.114		_
6. The name and so (if changed):	street address of the	e new registered agent	(if changed) and /	or registered of	fice A
_	Car	los N. Gonzalez			
	550	N. Nova Road			Ser To
. <del>-</del>	_	P.O. Box NOT	-		
_	Day	tona Beach, FL	32114		- 35
The street address as changed will b	s of its registered one identical.	office and the street a	ddress of the busin	ness office of i	ts registered agent,
Such change was authorized by the	authorized by reserve board, or the corp	olution duly adopted poration has been not	by its board of dir ified in writing of	ectors or by an the change.	officer so
Signature	of an officer or director			N. Gonzale	
I hereby accept th I further agree to of my duties, and document is being	he appointment as comply with the p I am familiar with g filed merely to re	registered agent and provisions of all statu h and accept the oblig eflect a change in the titing of this change.		- *	
			2/20/1	12	·
Signa	ture of Registered Agent		· · · · · · · · · · · · · · · · · · ·	Date	
If signing on beha	alf of an entity:				
	Gonzalez				
Тур	ed or Printed Name	<del></del>	•		

\* \* \* FILING FEE: \$35.00 \* \* \*