

Mar 13 1997 8:00am
Secretary of State

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

(6)

M. J. Griffin, D. J. Griffin

% THOMAS P. FINAN
1760 NW 94 AVENUE
MIAMI FL 33172-2336

2a. Isobutyl Alcohol

21	London, England	26	London, England
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9. Name and Address of Current Registered Agent

PERNA, ANTHONY J.
1760 N.W. 94TH AVENUE
MIAMI FL 33172

81	Name
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82 Street Address (P.O. Box Number is Not Acceptable)

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84	City
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FL 85 Zip Code

11. The undersigned, the duly authorized officer of the Florida State Board of Education, hereby certifies that the above named corporation is entitled to this statement for the purpose of changing its registered name to the Florida State Board of Education, State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent of the corporation with an office at the corporation's address at 1200 North 10th Street, Florida State Board.

12.	PD	☐ DETAIL
13.	PERNA, ANTHONY J.	
14.	1760 N.W. 94TH AVENUE	
15.	MIAMI FL	☐ DETAIL
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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	☐ Change	☐ Addition
12 NAME		
13 STREET ADDRESS		
14 CITY ST ZIP		
21 TITLE	☐ Change	☐ Addition
22 NAME		
23 STREET ADDRESS		
24 CITY ST ZIP		
31 TITLE	☐ Change	☐ Addition
32 NAME		
33 STREET ADDRESS		
34 CITY ST ZIP		
41 TITLE	☐ Change	☐ Addition
42 NAME		
43 STREET ADDRESS		
44 CITY ST ZIP		
51 TITLE	☐ Change	☐ Addition
52 NAME		
53 STREET ADDRESS		
54 CITY ST ZIP		
61 TITLE	☐ Change	☐ Addition
62 NAME		
63 STREET ADDRESS		
64 CITY ST ZIP		

14. I hereby certify that the information supplied with this filing is not, and is not to be, the exemption stated in Section 119.07(3)(g), Florida Statutes. I further certify that the information contained in this report and the accompanying annual report is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am a duly authorized officer, director, or partner of the business or trader employed to execute this report as required by Chapter 607, Florida Statutes, and that my name is not included in the list of disqualified persons as provided for with an address:

SIGNATURE:

Anthony J. Perna ANTHONY J PERNA 2/27/95
 I HEREBY CERTIFY THAT THE ABOVE IS A TRUE AND CORRECT COPY OF THE ORIGINAL DOCUMENT.

 I, _____, SECRETARY OF THE BOARD OF DIRECTORS, DO HEREBY CERTIFY THAT THE ABOVE IS A TRUE AND CORRECT COPY OF THE ORIGINAL DOCUMENT.

1. SIGNATURE AND EXHIBIT OF PRESIDENT OR SIGNING OFFICER OR DIRECTOR

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