\$ 188.	FEE Ann 75 Ma and Mailing Acted Liability Co	nual Report \$100.00 ake Check Payable 1		LORIDA DEPARTMENT OF STATE  Katherine Harris  Secretary of State  DIVISION OF CORPORATIONS			SECRETARY OF STATE DIVISION OF CORPORATIONS  99 APR 22 AM 10: 47			
1. Name a of Limit	and Mailing Ac		+ \$88.75 (o: FL <u>OR</u>	Corporati	ion Supp	plemental Fee	Í	## FH ++ =	• •	
1		idress Impany DOCU	MENT	# L98	30000	00827	]			
TAPETER DECORATIVE WALL SOLUTIONS 1239 EAST NEWPORT CENTER, SUITE 1 DEERFIELD BEACH FL 33442										
2. Principa	al Place of Bu	siness	2a. Mail	ing Address			3. Date Organize	ed or Qualified 3	3a. State of Form	nation
			Cuito Ar				06/19/1998 FL			
Suite, Apt. #, etc. Suite,			Suite, Api	Apt. #, etc			4. FEI Number	- 000		Applied For
City & State			City & Str	City & State			65-08	342999	<b>)</b>	Not Applicable
Zip		Country	Ζιρ		Countr	у	5. Date of Last R	· I -	6. Certificate of S \$8.75 Additional Fed	
	7. Name	e and Address of Current	Registered	Agent		8. N	Name and Address	of New Register	red Agent/Office	;
ROOS, DICH 1239 EAST NEWPORT CENTER, SUITE I DEERFIELD BEACH FL 33442					L <b>17</b>	Street Address (P.O. Box Number is Not Acceptable)  Suite, Apt. #, etc.  City  Zip Code				
its register	ed office or reg	isions of Sections 608.416 a gistered agent, or both, in the d accept the obligations.	and 608.508. State of Flo	, Florida State rida. Such ch	ules, the ab ange was ac	pove-named limited uthorized by affirmat	liability company su tive vote of a majority	ibmits this stateme y of the members. I	ent for the purpos hereby accept the	se of changing e appointment
SIGNATURE (Buggered Agent Assepting Ages, Innex) (POTE					f Agest signature	cincy med whom remobilities	DATE:			
10. Title Managing Members/Managers					ess Street Address		City, Si	tate and Zip Code	e	
MGRM	ROOS,	DICH		1239	EAST	NEWPORT	CENTER,	DEERFIE	ELD BEAC	CH FL
MGRM	ROOS,	DEBORAH		1239	EAST	NEWPORT	CENTER,	DEERFIE	ELD BEAC	H FL
							70	1000228 -04/29/ ****18	8516744 7990198 38,75 ***	7/( 9015 **188.79

SIGNATURE:

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