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I ALBRITTON

COVER LETTER

TO:

Amendment Section Division of Corporations

SUBJECT: Book Island Festival, Inc.

Name of Corporation

DOCUMENT NUMBER

N01000006844

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:

Mary Grace Herrington, President

Name of Contact Person

Book Island Festival, Inc.

Firm/Company

PO Box 15286

Address

Fernandina Beach, FL 32035

City/State and Zip Code

info@ameliaislandbookfestival.org

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Mary Grace Herrington

904 , 755-

Name of Contact Person

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

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

statement of ch	e provisions of sections 607,0502, 617,0502, 607,1508, or 617,1508, Florida Statutes, this ange is submitted for a corporation organized under the laws of the State of Florida er to change its registered office or registered agent, or both, in the State of Florida.
1. The name of	the corporation: Book Island Festival, Inc.
2. The principal	I office address: 516 South 10th Street Suite 116 ina Beach, FL 32035
3. The mailing : Fernan	address (if different): PO Box 15286 ndina Beach, FL 32035
4. Date of incor	rporation/qualification: 09/25/2001 Document number: N0100006844
	d street address of the current registered agent and registered office on file with the artment of State: (If resigned, enter resigned)
	Incorp Services, Inc.
	17888 67th Court North
	Loxahatchee, FL 33470
6. The name and (if changed):	Amelia Island Book Festival 516 South 10th Street Suite 116 P.O. Box NOT acceptable Fernandina Beach, FL 32035
The street addras changed will	ress of its registered office and the street address of the business office of its register agent, I be identical.
Mareby accept	Mary Grace Herrington, President The appointment as registered agent and agree to act in this capacity. To comply with the provisions of all statutes relative to the proper and complete from duties, and I am familiar with and accept the obligation of my position as registered is document is being filed merely to reflect a change in the registered office address. I that the corporation has been notified in writing of this change.
U	gnature of Registered Agent Date
	chalf of an entity: se Herrington, President
IVIALY GLAC	e nemiglon, Fresident

Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

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

Typed or Printed Name