P00000008947

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CORPORATION NAME(S) & DOCUM			
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☐ Walk in ☐ Pick up time		Certified Copy	
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NEW FILINGS	<u>AMENDMENTS</u>		* . · · •
Profit Not for Profit Limited Liability Domestication Other	Amendment Resignation of R.A., C Change of Registered Dissolution/Withdraw Merger	Agent \(\frac{1}{2} \)	FILED 1 AUG -6 PH
OTHER FILINGS	REGISTRATION/QUAI	LIFICATION SET	72: 49
Annual Report Fictitious Name	Foreign Limited Partnership Reinstatement Trademark Other	T. LEWIS AUG	7 2001

CR2E031(7/97)

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes,	
the undersigned corporation organized under the laws of the State of Florida	
submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.	
1. The name of the corporation: Kidzgrow Inc.	-
	erine response and
2. The mailing address of the corporation: P.O. Box 1013	
Valrico, FL 33595	
3. Date of incorporation/qualification: 1/27/00Document number: P00000008947	• .
4. The name and address of the current registered agent and office:	·
Broadnax, Meria	-
1463 Lakeshore Ranch Drive	
Seffner, FL 33584	
5. The name and address of the new registered agent (if changed) and/or registered office (if changed). (P. O. Box Not Acceptable)	a fee g
Broadnax, Meria	
301 PAIK Springs circle #2	
Plant (Hy fl. 33567	
The street address of its registered office and the street address of the business office of its registered agent, as changed, will be identical.	
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board.	
(Signature of an officer, chairman or vice chairman of the board) 913101 (Date)	
Meria Broadnax (Printed or typed name and title)	a tu
Having been named as registered agent and to accept service of process for the above stated corporation, I hereby accept the appointment as registered agent and agree to act in this capacity. Further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as egistered agent.	
(Signature of Registered Agent) (Date)	· ·
f signing on behalf of an entity:	7
Meria Broadias	
(Typed or Printed Name) (Capacity)	
* * * FILING FEE: \$35.00 * * *	

CR2E045(9/00)