PWW0146579

FIVE Star Texture Inc. 11257 S. OBT Swite 2012 ORlando 7e 32837

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1	
(Corporation Name)	(Document #)
2	5000044639859
(Corporation Name)	(Document #) -07/09/0101049020 *****35.00 *****35.00
3. (Corporation Name)	(Document #)
4. (Corporation Name)	(Document #)
□ Walk in□ Pick up time□ Mail out□ Will wait	Certified Copy Photocopy Certificate of Status
NEW FILINGS Profit Not for Profit Limited Liability Domestication Other OTHER FILINGS Annual Report Fictitious Name	Amendment Resignation of R.A., Officer/Director Change of Registered Agent Dissolution/Withdrawal Merger REGISTRATION/QUALIFICATION Reinstatement Trademark Other

CR2E031(7/97)

Examiner's Initials

T BROWN JUL 1 1 2001

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 <u>Florian</u> 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: FIVE STAR TEXTURE, INC.
The same of the sa
2. The mailing address of the corporation: 1/257 South Onquee Blsm Suite Zon
Onlando, Flori04 32837
3. Date of incorporation/qualification: 05/08/2000 Document number: P00000046579
4. The name and address of the current registered agent and office:
Cynthin MoyaL
Cyaffin MoyaL 1/257 Son PH ORANGE Blan Su: PE 202 Onla-so, Florida 32837 5. The name and address of the new registered agent (if changed) and/or registered office (if changed): of the new registered agent (if changed) and/or registered office (if changed): of the new registered agent (if changed) and/or registered office (if changed): of the new registered agent (if changed) and/or registered office (if changed): of the new registered agent (i
ORLA-NO. FLORION 32837
5. The name and address of the new registered agent (if changed) and/or registered office (if changed):0
(P. O. Box Not Acceptable)
MichAEL Moyal
11257 SonFA ORANGE Blen Shitz 202
Orlando, Florion 32837
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
6/28/01
(Signature of art officer, chairman or vice chairman of the board) (Date)
(Printed or typed name and title)
(Printed or typed name and title)
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. I 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
registerea agent.
× () () () () () () () () () (
Agentine of Registered Agent) (Date)
If signing gar behalf of an entity:
(Typed or Printed Name) (Capacity)
** * FILING FEE: \$35.00 * * *

CR2F:045(9/00)