

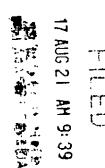
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## COVER LETTER

TO: Amendment Section Division of Corporations Cookin' Skinny, Inc. Name of Corporation P00000082918 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: Helen Martinson Name of Contact Person Cookin' Skinny, Inc. Firm/Company 239 Oakwood Drive Elizabethtown, KY 42701 City/State and Zip Code tootytoo@comcast.net E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: **Christy Peterson** Name of Contact Person 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	ange is submitted for a corporation	617.0502, 607.1508, or 617.1508, Florida on organized under the laws of the State of	Florida	'his	_
<u> </u>	* *	or registered agent, or both, in the State of i	Florida.		
1. The name of	the corporation: Cookin' Ski	nny, Inc.			
2. The principa	office address: 239 Oakwoo	od Drive			
Eliza	bethtown, Kentucky 42	2701			
3. The mailing	address (if different):				
4. Date of incorporation/qualification: Document number: P000			000829	18	
5. The name an		gistered agent and registered office on file w			
	Helen Martinson		_		
	239 Oakwood Drive				
	Elizabethtown, KY 42	2701	Ti.		
6. The name an (if changed):	d street address of the new regist-	ered agent (if changed) and /or registered of	ffice TF	7 AUG 2	
	Christy Peterson		***		
	11440 Okeechobee B	lvd., Suite 102	₹ <u>*</u>	AH 9:	Ö
	Royal Palm Beach, Fl	), Box_NOT acceptable 33411	100	39	
The street addi	ress of its registered office and the	ne street address of the business office of it	ts register	ed age	ent,
-		adopted by its board of directors or by an been notified in writing of the change.			
Helead	Martinson	Helen Martinson, Presi			_ <b>_</b>
– I further agree – performance o	to comply with the provisions of f my duties, and I am familiar wi	agent and agree to act in this capacity.  If all statutes relative to the proper and con  ith and accept the obligation of my position  by to reflect a change in the registered office  fortified in writing of this change.	nplete n as reois	tered s. 1	
D Shew	gnadare of Registered Agent	8/14/17			
Si	gnature of Registered Agent	Date	•		_
If signing on b	chalf of an entity:  Perferson				
	Typed or Printed Name				

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (03/12)

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