

P01000025964

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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MAIL

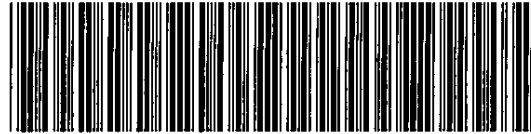
(Business Entity Name)

(Document Number)

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06/02/06--01007--001 \*\*35.00

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RA to change

T. Roberts JUN 08 2008

06 JUN -2 PM 12:06  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

The Law Offices of  
**COHEN, GREENBERG, LEVY & LEVY, L.L.C.**

1792 Bell Tower Lane  
Weston, Florida 33326

Michael J. Cohen  
Ross M. Greenberg  
Bryan P. Levy  
Chad E. Levy

Broward: (954) 659-8300  
Dade: (305) 438-2828  
Facsimile: (954) 659-8343

May 31, 2006

Amendment Section:  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Re: Game Zone Inc.

To Whom It May Concern:

Enclosed herewith please find Articles of Amendment to Articles of Incorporation to Game Zone Inc, and change of registered agent and 2 checks made payable to the Department of State for \$35 each.

If you have any questions please do not hesitate to call me at (954) 659-8300

Yours truly,



By: Ross M. Greenberg, Esq.

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Game Zone Inc.

(Name of Corporation)

**DOCUMENT NUMBER:** P01000025964

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:

Ross M. Greenberg

(Name of Contact Person)

Cohen, Greenberg, Levy, & Levy LLC

(Firm/Company)

1792 Bell Tower Lane

(Address)

Weston, Florida 33326

(City/State and Zip Code)

For further information concerning this matter, please call:

Ross M. Greenberg

(Name of Contact Person)

at ( 954 ) 659-8300

(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**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Game Zone Inc.
2. The principal office address: 5041 South State Road 7, Davie, Florida 33314
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 3/13/2001 Document number: P01000025964
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

Michelle Thomas

12305 NW 1st Street

Plantation, Florida 33325

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Stephanie Biramontes

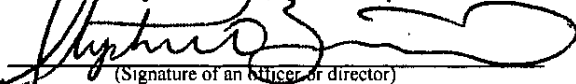
6577 SW 41st Court

(P.O. Box NOT acceptable)

Davie, Florida 33314

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, or the corporation has been notified in writing of the change.

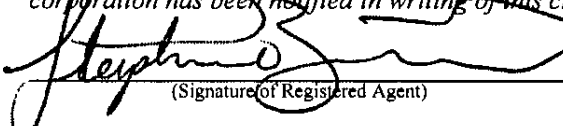
  
(Signature of an officer or director)

Stephanie Biramontes

(Printed or typed name and title)

President

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 registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

  
(Signature of Registered Agent)

5/30/00  
(Date)

If signing on behalf of an entity:

\_\_\_\_\_  
(Typed or Printed Name)

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE  
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

CR2E045 (8/05)

FILED  
06 JUN -2 PM 12:06  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA