P01000105425

(Requestor's Name)	000011149250
Art For Charity Inc. 64 New York Ave. Dunedin, FL 34698	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	02/07/0301002020 **35.00
Certified Copies Certificates of Status	
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STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Fursuant 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 TOMOA. 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: ART FOR CHARITY, INCORPORATES
2. The mailing address of the corporation: 64 NEW YORK AVE, DUNED W 34698
3. Date of incorporation/qualification: OCTOBER 31, 2001 Document number: PO1000105425
4. The name and address of the current registered agent and office:
MYLLEW, VIMOTHY
1100 CLEVELAND ST, SUITE 915
CLEARWATER, FL 33755 PM &
5. The name and address of the new registered agent (if changed) and/or registered office (if changed): (P. O. Box Not Acceptable)
Mc CLURG, GERRY
64 NEW YORK AVE TS
DUNEDIN FL 34698
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) (Date)
Mc CLURA, PENNY, OFFICER.
(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
registered agent. (Signature of Registered Agent) (Date)
(Signature of Registered Agent) (Date)
If signing on behalf of an entity:
(Typed or Printed Name) (Capacity)

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