

PO30000010803

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

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address
change

06/29/12--01010--001 **140.00

FILED
2012 JUN 29 PM 4: 00
SECRETARY OF STATE
TALLAHASSEE FLORIDA

DR
7/3/12

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: Multimedia Graphics Import - Export, Corp
2. The principal office address: 10955 SW 177th Terr
Miami FL 33157
3. The mailing address (if different): 10955 SW 177 Terr
Miami FL 33157
4. Date of incorporation/qualification: 01/29/2003 Document number: PD3000010803
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

Liliana M. Restrepo
7570 NW 14th St # 106
Miami FL 33126

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

Liliana M. Restrepo
10955 SW 177th Terr
Miami FL 33157

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2012 JUN 29 PM 1:00
SECRETARY OF STATE
TALLAHASSEE FLORIDA

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]
Signature of an officer or director

Liliana M. Restrepo
Printed or typed name and title

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]
Signature of Registered Agent

Date

If signing on behalf of an entity:

Liliana M. Restrepo
Typed or Printed Name

Officer/Director - Address change
Liliana M Restrepo
10955 SW 177th Terr
Miami FL 33157

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

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

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Liliana M. Restrepo
7570 NW 14th St # 106
Miami FL 33126

FILED
 2012 JUN 29 PM 4:00
 SECRETARY OF STATE
 TALLAHASSEE FLORIDA

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

Liliana M. Restrepo
10955 SW 177th Terr
P.O. Box NOT acceptable
Miami FL 33157

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Liliana M. Restrepo
Signature of an officer or director

Liliana M. Restrepo
Printed or typed name and title

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Liliana M. Restrepo
Signature of Registered Agent

Date

If signing on behalf of an entity:
Liliana M. Restrepo
Typed or Printed Name

Office Director - Address change
Liliana M Restrepo
10955 SW 177th Terr
Miami FL 33157

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