

Aug 18 04 07:09a AIR
Division of Corporations

3056752811

Página 1 de 1

P03000053987

Florida Department of State
Division of Corporations
Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H04000169849 3)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:
Division of Corporations
Fax Number : (850)205-0380

From:
Account Name : A 1 A CORPORATE SERVICES, INC.
Account Number : I20010000247
Phone : (877) 527-3463
Fax Number : (305) 675-2811

RECEIVED

04 AUG 19 AM 10:13

DIVISION OF CORPORATIONS

REGISTERED AGENT CHANGE

EXTREME FABRICS, INC.

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$35.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

04 AUG 19 PM 1:09

FILED

Electronic Filing Menu

Corporate Filing

Public Access Help

2/A Chg
mm
8/19/04

Aug 19 04 07:09a

R1A

3056752811

P.2

HCY 000 169 849 '3

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: EXTREME FABRICS, INC.
2. The principal office address: 901 COCHRAN DRIVE LAKE WORTH FL 33461
3. The mailing address (if different): _____

4. Date of incorporation/qualification: 05/15/2003 Document number: P03000053987

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

CHAD CORNEIL

901 COCHRAN DRIVE

LAKE WORTH FL 33461

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

A1A REGISTERED AGENT INC.

92 SADBERRY ROAD

(P.O. Box or personal mailbox NOT acceptable)

QUINCY FL 32351

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, chairman or vice chairman of the board)

CHAD CORNEIL, DIRECTOR

(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 of Registered Agent)

8/19/04
(Date)

If signing on behalf of an entity:

PAUL SMITH
(Typed or Printed Name)

Vice President
(Capacity)

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

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

FILED
04 AUG 19 PM 1:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

HCY 000 169 849 '3