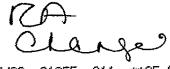
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COVER'LETTER

Division of Corporations

SUBJECT: CLOTHING MANAGEMENT INC
(Name of Corporation)

DOCUMENT NUMBER:

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:

DAVID CHASSON
(Name of Contact Person)

CLOTHING MANAGEMENT INC
(Firm/Company)

3339
(Address)

PLANTATIQUE Gray City/State and Zip Code)

For further information concerning this matter, please call:

DAVID CHASSON
(Name of Contact Person)

at (Area Code & Daytime Telephone Number)

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327

Enclosed is a \$35.00 check made payable to the Department of State.

Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

TO:

Amendment Section



December 19, 2006

David Chasson Clothing Management Inc. 8329 W. Sunrise Blvd. Plantation, FL 33322

SUBJECT: CLOTHING MANAGEMENT, INC.

Ref. Number: P03000080522

We have received your document for CLOTHING MANAGEMENT, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please fill in the current registered agents address and the new registered agents address as well as the principal and mailing address.

If you have any questions concerning the filing of your document, please call (850) 245-6907.

Annette Ramsey Document Specialist

Letter Number: 206A00071810

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 statement of change is submitted for a corporation organized under the laws of the State of FLOR in order to change its registered office or registered agent, or both, in the State of Florida.	RIDA
1. The name of the corporation: CLOTHING MANAGEMENT, INC.	
2. The principal office address:	
3. The mailing address (if different):	
4. Date of incorporation/qualification: Document number:	
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:	SSEE
CATHY CHASSON	
1777 NW 72nd Ave Ste 2H13	Dr.
Plantation FC 33/210	
The name and street address of the new registered agent (if changed) and /or registered office (if changed):	
DAVID CHASSON	,
83201 W SUNRISE BLVD (P.O. Box NOT acceptable)	•••
PLATATION, FC 33322	
The street address of its registered office and the street address of the business office of its registered as changed will be identical.	stered agent,
Such change was authorized by resolution duly adopted by its board of directors or by an office authorized by the board, or the corporation has been notified in writing of the change.	
DAVIP DAVIP DAVIP OF ASS & A	<u> </u>
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 of my duties, and I am familiar with and accept the obligation of my position as registered agendocument is being filed merely to reflect a change in the registered office address, I hereby concorporation has been notified in writing of this change.	performance nt. Or, if this ifirm that the
Comparing 12/2/66 (Signature of Registered Agent)	<u></u>
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)