

P03000154748

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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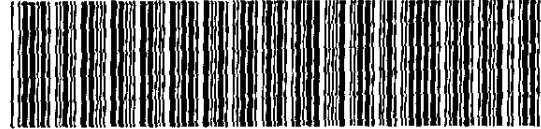
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Nothing But Initials, Inc.

(Name of corporation)

**DOCUMENT NUMBER:** P03000154748

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:

Daniel Almeida

(Name of contact person)

Nothing But Initials, Inc.

(Firm/Company)

4550 NW 9th Street, #210-E

(Address)

Miami, Florida, 33126.

(City/state and zip code)

For further information concerning this matter, please call:

Daniel Almeida

(Name of contact person)

at ( 305 ) 513-9277

(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  
409 E. Gaines Street  
Tallahassee, FL 32399



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood  
Secretary of State

January 26, 2005

DANIEL ALMEIDA  
NOTHING BUT INITIALS, INCORPORATED  
4550 NW 9TH STREET, #210-E  
MIAMI, FL 33126

SUBJECT: NOTHING BUT INITIALS, INCORPORATED  
Ref. Number: P03000154748

We have received your document for NOTHING BUT INITIALS, INCORPORATED and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The current name of the entity is as referenced above. Please correct your document accordingly.

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6880.

Karen Gibson  
Document Specialist

Letter Number: 505A00005391

**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: Nothing But Initials, Inc. incorporated
2. The principal office address: 4550 NW 9th Street, #210-E, Miami, Florida, 33126.
3. The mailing address (if different): Same as above.

4. Date of incorporation/qualification: 12/23/2003 Document number: P03000154748
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

Leonardo Almeida

4550 NW 9th Street, #210-E

Miami, Florida, 33126.

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

Daniel Almeida

4550 NW 9th Street, #210-E

(P.O. Box NOT acceptable)

Miami, Florida, 33126.

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)

Rick Johnson, Secretary

(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)

Tuesday, January 18th, 2005

(Date)

If signing on behalf of an entity:

N/A

(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