## P04000045616

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ASP

## To Whom It May Concern:

This letter is written concerning the change of address for Funco Resorts Inc. and all of its agents, principals, and directors. I have enclosed the filing fee of \$35 for the changes. Please notify me via email as soon as the changes have been made.

Thank You,

Anthony DiGiacomo

President

Funco Resorts Inc.

Anthony@funcoresorts.com

407-466-3355

## TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Funco Resorts Inc. (Name of corporation)
DOCUMENT NUMBER: 70 40000 45616
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filin
Please return all correspondence concerning this matter to the following:
Anthony Diffiacemo (Name of person)
(Name of person)
Funco lesorts Inc (Name of firm/company)
(Name of firm/company)
1007 North Federal Hwy
(.134.65)
Handerdale, FC 33304 (City/slate and zip code)
For further information concerning this matter, please call:
Anthony Diffiacomo at (877) 499-3424  (Name of person) (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

## 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
in order to change its registered office or registered agent, or both, in the State
of Florida.  1. The name of the corporation: Funco Resorts Inc
2. The principal office address: 1007 North Federal Hwy # 32
F+ Landerdale, FL 33304
3. The mailing address (if different):
4. Date of incorporation/qualification: 3-12-04 Document number: Po400045611
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
Anthony DiGiacomo
2444 NE 1st BlvD
Graineville, PL 32609
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):  Anthony DiGiacomo
1007 North Federal Hwy #32 (PO. Box or personal mailbox NOT acceptable)
Ft Landerdale, PC 33304
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 before, or the corporation has been notified in writing of the change.  Hithery Diffice come President
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 affiress, I hereby confirm that the corporation has been notified in writing of this change.
(Date)
If signing on behalf of an entity:
(Typed or Printed Name) (Capacity)

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