## P04000064383

(Re	equestor's Name)	<u></u>		
(Áddress)				
(Ad	dress)			
(Čit	y/State/Zip/Phone	ə #)		
		MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	of Status		
Special Instructions to	Filing Officer:			
	Office Use Onl	y		

4

-



03/07/05--01031--002 \*\*70.00

in chunge

05 MAR -4 7112 Ē

COVER LETTER				
TO: Amendment Section Division of Corporations				
SUBJECT: RIP ENTERTAINMENT CORPORATION				
(Name of corporation)				
DOCUMENT NUMBER: P04000064383				
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:				
Glenroy C. Craig				
(Name of contact person)				
(Firm/Company)				
2284 Shoma Drive				
(Address)				
West Palm Beach, FL 33414				
(City/state and zip code)				
For further information concerning this matter, please call:				
Glenroy C. Craig at (561 )-528-6031 3/7-4/5/1 (Name of contact person) (Area code & daytime telephone number)				
(Name of contact person) (Area code & daytime telephone number)				
Enclosed is a \$35.00 check made payable to the Department of State.				
Mailing Address:Street Address:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327409 E. Gaines StreetTallahassee, FL 32314Tallahassee, FL 32399				

• • • •

ī.

i

ī.

CR2E045(6/04)

.

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

1. The name of the corporation: RIP ENTERTAINMENT CORPORATION

2. The principal office address: 2284 shome Drive / 750 N. FLORIDA MANGOR, MANGOR, 740E West Palm Beach, FL 3344 3344 09

 $\mathcal{G}$ 

3. The mailing address (if different):\_\_\_\_

4. Date of incorporation/qualification: April 13, 2004 Document number: P04000064383

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

Bryan S. Karr, Karr & Karr LLP

9922 SW 156 Ct.

Dade County, Miami, FL 33196

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

Robert N. Newman

2826 Broadway, Suite 202

(P.O. Box NOT acceptable)

Riviera Beach, FL 33404

(Typed or Printed Name)

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.

Alway Coais	Glenroy C. Craig,	President	
(Signature of an officer or director)	(Printed or	(Printed or typed name and title)	
I hereby accept the appointment as registered agen	t and agree to act in this c	apacity,	
I further agree to comply with the provisions of all	statutes relative to the nro	per and complete performance	
of my duties, and I an familiar with and accept the	obligation of my position	as registered agent. Or, if this	
document is peing filed merely to reflect a change i	in the registered office add	ress, I hereby confirm that the	
corporation has been no ified in writing of this cha	nge.		
	1/2010	5	
(Signature of Registered Agent)		(Date)	
If signing on behalf of an entity:			
KARALS N. NEWIS ADAL			

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

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