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Certified Copies	Certificates	of Status
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OR MAY 19 PH 2: 54
SECRETARY OF STATE

May 1/2 or

COVER LETTER

Division of Corporations SUBJECT: ____ S.A.E., Inc. (Name of Corporation) DOCUMENT NUMBER: P04000158843 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: Donna R. Skinner (Name of Contact Person) Florida Fashion Focus, Inc. (Firm/Company) 1717 NW 79 Avenue (Address) Doral, Florida 33126 (City/State and Zip Code) For further information concerning this matter, please call: Donna R. Skinner (305) 718-4320 Ext. 204 (Area Code & Daytime Telephone Number) (Name of Contact Person) Enclosed is a \$35.00 check made payable to the Department of State. **Mailing Address: Street Address:** Amendment Section Amendment Section **Division of Corporations** Division of Corporations P.O. Box 6327 Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

Tallahassee, FL 32314

TO:

Amendment Section

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	٥f	the	corporation:
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S.A.E., Inc.

2. The principal office address:

1717 NW 79 Avenue

Doral, FL 33126

- 3. The mailing address (if different):
- 4. Date of incorporation/qualification: November 22, 2004

Document number: P04000158843

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

Donna R. Skinner 777 NW 72 Avenue, Suite 3098 Miami, FL 33126

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

Donna R. Skinner 1717 NW 79 Avenue Doral, FL 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 of an officer or director)

Tom Carroll, President

(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.

Droop Brance	May 12, 2008	
(Signature of Registered Agent)	(Date)	

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