

POS0000063102

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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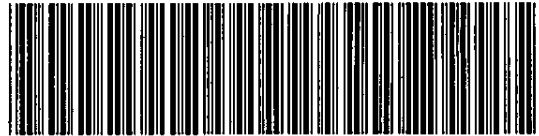
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

RACH 12/10/09

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Wide Awake Productions, Inc.
Name of Corporation

DOCUMENT NUMBER: P05000063102

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:

KRISTIN WARNER
Name of Contact Person

Wide Awake Productions
Firm/Company

13830 Oneida Dr. #F2
Address

Delray Beach, FL 33446
City/State and Zip Code

kwarner@wideawakeproductions.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Kristin Warner at (561) 865-0556
Name of Contact 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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

**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: Wide Awake Productions, Inc.
2. The principal office address: 13830 Oneida Dr. # F2
Delray Beach, FL 33446
3. The mailing address (if different): 13900 Jog Road, Suite 203-222
Delray Beach, FL 33446
4. Date of incorporation/qualification: 4/28/2005 Document number: P05000063102
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

Kristin Warner
433 Plaza Real, Suite 275
Boca Raton, FL 33432

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TALLAHASSEE, FLORIDA

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

Kristin Warner
13830 Oneida Dr. Suite F2
P.O. Box NOT acceptable
Delray Beach, FL 33446

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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.

K Warner
Signature of an officer or director

Kristin Warner 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.

K Warner
Signature of Registered Agent

Dec. 1, 2009
Date

If signing on behalf of an entity:

KRISTIN WARNER
Typed or Printed Name

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