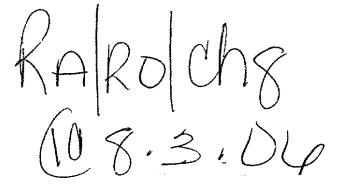
105000103452

| (Req | uestor's Name) | |
|----------------------------|------------------|-------------|
| (Add | ress) | |
| (Addi | ress) | |
| (City/ | /State/Zip/Phone | · #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Busi | ness Entity Nam | ne) |
| (Doci | ument Number) | |
| Certified Copies | Certificates | of Status |
| Special Instructions to Fi | ling Officer: | |
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| | | |

Office Use Only





800077687678

07/19/06--01011--011 **35.00



COVER LETTER

| TO: Amendment Section Division of Corporations |
|---|
| SUBJECT: Multi Kids Toys, Inc (Name of Corporation) |
| DOCUMENT NUMBER: P05000103452 |
| 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: |
| Fred Gross (Name of Contact Person) |
| Multi KidsToys, Inc. (Firm/Company) |
| 9858 Clint Moore Rd C106 (Address) |
| Boca Raton, FL 33496 (City/State and Zip Code) |
| For further information concerning this matter, please call: |
| Fred Gross at 561 , 477-1988 |
| (Name of Contact Person) at (56) 477-1988 (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



July 26, 2006

FRED GROSS MULTI KIDS TOYS, INC. 9858 CLINT MOORE RD C106 BOCA RATON, FL 33496

SUBJECT: MULTI KIDS TOYS, INC.

Ref. Number: P05000103452

We have received your document for MULTI KIDS TOYS, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

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) 245-6964.

Irene Albritton Document Specialist

Letter Number: 506A00047295

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 FLOTIDA |
|--|
| in order to change its registered office or registered agent, or both, in the State of Florida. |
| 1. The name of the corporation: Multi Kids Tous, Inc. |
| 2. The principal office address: 9858 Clint Moore Rd C106 |
| Boca RATON, FL 33496 |
| 3. The mailing address (if different): |
| E |
| 4. Date of incorporation/qualification: 7/22/05 Document number: P05000103452 |
| 5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: |
| ucc Filing & Search Services, Inc. |
| UCC Filing & Search Services, Inc. 1574 Village Square Blud. Suite 100 |
| TAILAHASSEE FL 32309 |
| 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): |
| FRED GROSS |
| 9858 Clint Moore Rd CIOL |
| Boca Raton FL 33496 |
| The state of the s |
| 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 other or director) Fred Gross, T (Printed or typed name and atte) |
| 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 increiv to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change. |
| The This |
| (Signature of Registered Agent) (Date) |
| If signing on behalf of an entity: |
| (Typed or Printed Name) |
| (Types of Primes Name) * * * FIU INC EEE • \$35.80 * * * |

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (8/05)