

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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Phone : (608) 827-5300
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**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: stefanie@signatureschoolproducts.com

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RECEIVED
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

REGISTERED AGENT CHANGE
SIGNATURE PRODUCTS, INC.

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Corporate Filing Menu

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H 11000 295 1123

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: Signature Products, Inc.
2. The principal office address: 2650 Pemberton Dr., Apopka, Florida 32703
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 7/25/2005 Document number: P05000103639
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)

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
MIAMI, FL 33145

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

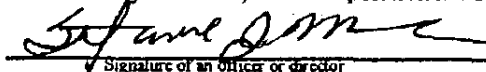
C T Corporation System

1200 South Pine Island Road, Plantation, Florida 33324

P.O. Box NOT acceptable

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

Stefanie J. Monahan, 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.


 Signature of Registered Agent

6th day of December, 2011
 Date

If signing on behalf of an entity:

Mark Williams, AVP

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

CR2E043 (8/03)

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