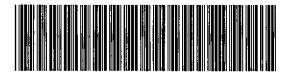
P05000137414

(Re	equestor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to Filing Officer:		

Office Use Only



800272138288

05/08/15--01016--011 **35.00

15 MAY - 8 PM 1.55

S'NY S

COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: Editorial Rx, Inc.

Name of Corporation

DOCUMENT NUMBER: PO

PO5000137414

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:

Lori Alexander

Name of Contact Person

Editorial Rx, Inc.

Firm/Company

3233 Eleanor Way

Address

City/State and Zip Code

N. Fort Myers, FL 33917

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Lori Alexander

,239 217-0704

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

statement of change is submitted for a corporation or in order to change its registered office or registered.		
1. The name of the corporation: Editorial Rx, Inc.	•	
2. The principal office address: 3233 Eleanor W	Vay, N. Fort Myers, FL 33917	
3. The mailing address (if different): same		
4. Date of incorporation/qualification: 10/01/200	5 Document number: PO500013741	14
5. The name and street address of the current registere Florida Department of State: (If resigned, enter resi	ed agent and registered office on file with the	
Lori Alexander		
609 Thornwood Lane		-
Orange Park, FL 32073		5 HA
6. The name and street address of the new registered a (if changed): Lori Alexander	agent (if changed) and /or registered office	15 MAY -8 PM 1: 39
		- π : ω :
3233 Eleanor Way	NOT acceptable	9 :
N. Fort Myers, FL 33917		
The street address of its registered office and the str as changed will be identical.	reet address of the business office of its registere	d agent,
Such change was authorized by resolution duly ador authorized by the board, or the corporation has been	pted by its board of directors or by an officer so i notified in writing of the change.	
all whit	Deborah Whippen	
Signature of an officer or director I hereby accept the appointment as registered agent I further agree to comply with the provisions of all sperformance of my duties, and I am familiar with an agent. Or, if this document is being filed merely to hereby confirm that the corporation has been notification.	statutes relative to the proper and complete nd accept the obligation of my position as registe reflect a change in the registered office address,	ered I
Ani Alexander Signature of Registered Agent	May 1, 2015	
If signing on behalf of an entity:		
Lori Alexander		
Typed or Printed Name * * FILING	FEE: \$35.00 * * *	