## P05000 143398

| (Requestor's Name)                      |                   |             |  |  |
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| (City                                   | y/State/Zip/Phon  | e #)        |  |  |
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SECRETARY OF STATE DIVISION OF CORPORATIONS

RA Change 07/67/16 De

## **COVER LETTER**

| TO:   | Amendment Section Division of Corporations  |  |  |  |  |
|---|---|--|--|--|--|
| SUBJECT: Treasure Coast Mags, Inc. (Name of Corporation)                                      |   |  |  |  |  |
| DOCUMENT NUMBER: P05000143398   |   |  |  |  |  |
| 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:                     |   |  |  |  |  |
|   | ······································  |  |  |  |  |
|   | Joseph A. Porrello  |  |  |  |  |
| (Name of Contact Person)  |   |  |  |  |  |
|   |   |  |  |  |  |
|   | Joseph A. Porrello, P.A.  (Firm/Company)  |  |  |  |  |
|   | (Firm/Con   | pany)  |  |  |  |
|   | P.O. Box 450249   |  |  |  |  |
| (Address)   |   |  |  |  |  |
|   |   |  |  |  |  |
|   | Miami, Florida 33245  |  |  |  |  |
| (City/State and Zip Code)   |   |  |  |  |  |
| For furt  | ther information concerning this matter, please cal   | 1:   |  |  |  |
| Joseph  | n A. Porrello   | at ( 305 ) 374-0092  |  |  |  |
| <u>_</u>  | (Name of Contact Person)  | at ( 305 ) 374-0092 (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 |  |  |  |



## FLORIDA DEPARTMENT OF STATE Division of Corporations

June 28, 2006

JOSEPH A PORRELLO JOSEPH A PORRELLO, P.A. P O BOX 450249 MIAMI, FL 33245

SUBJECT: TREASURE COAST MAGS, INC.

Ref. Number: P05000143398

We have received your document and check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

There is a balance due of \$10.00. Refer to the attached fee schedule for a breakdown of the fees. Please return a copy of this letter to ensure your money is properly credited.

The fee to file your document is \$35.

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) 245-6906.

Darlene Connell Document Specialist

Letter Number: 106A00042737

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

| statement of cha  | ange is submitted for a corporation org  | 9502, 607.1508, or 617.1508, Florida Statute<br>ganized under the laws of the State of _Florida<br>sistered agent, or both, in the State of Florida                                      | a   |
|---|--|--|---|
| 1. The name of  | the corporation: Treasure Coast Mags   | , Inc.   |   |
|   |  | oad, Building 4, Suite 3A, Pompano Beach, F  | Florida 33073                                   |
| 3. The mailing a  | address (if different):  |  |   |
| 4. Date of incor  | rporation/qualification: 10/20/2005  | Document number: P0500014339   | 8   |
|   | nd street address of the current registered artment of State:  | d agent and registered office on file with the   |   |
|   | Deborah Cuomo  |  |   |
|   | 2301 West Sample Road, Building 4, Suite 3A  |  |   |
|   | Pompano Beach, Florida 3307  | ′3   | <u> </u>  |
| 6. The name and (if changed):   |  | gent (if changed) and /or registered office  | SECRETARY VISION OF CO                          |
|   | Joseph A. Porrello   |  | F CK  |
|   | 2929 Southwest Third Avenu   |  | 3 PP 1  |
|   | (P.O. Box NOT accepta<br>Miami, Florida 33129  | ible)  | 3: 5  |
|   | ress of its registered office and the stre<br>! be identical.  | eet address of the business office of its regis  | stered agent,                                   |
| ellyh   | vas authorized by resolution duly adop<br>the board, or the corporation has been<br>ture of an officer or dijector)  | oted by its board of directors or by an office notified in writing of the change.  Michael Velez  (Printed or typed name and title)  | r so  |
| I hereby accept<br>I further agree<br>of my duties, a<br>document is be<br>corporation ha | t the appointment as registered agent<br>to comply with the provisions of all si<br>nd I am familiar with and accept the o<br>sing filed merely to deflect a change in<br>is been notified in writing of this chan | and agree to act in this capacity,<br>tatutes relative to the proper and complete<br>obligation of my position as registered agen<br>the registered office address, I hereby con,<br>ge. | performance<br>ut. Or, if this<br>firm that the |
|   | 1/////   | 6-16-2006  |   |
| If signing on be  | igniture of Registered Agent) ehalf of an entity:  | (Date)   | _   |
| (   | (Typed or Printed Name)  |  |   |

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