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(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer	
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SECRETARY OF STATE
ALLAHASSEF, FIGURE

COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: PINAPCHE DESIGN STUDIO INC. (Name of Corporation)
DOCUMENT NUMBER: P05000 149 706
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:
Name of Contact Person)
(Firm/Company)
230 NE 17157 (Address)
NORTH MIANI BEACH FLOUDH 33/62 (City/State and Zip Code)
For further information concerning this matter, please call:
PANE BROWN. at (305) 405 6484 (Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed is a \$35.00 check made payable to the Department of State

one on the payable to the Department of Build.

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 GHANGE 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 FOLDA
in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: PINNACLE DESIGN STUDIOS, INC.
2. The principal office address: 20717 NW 2 AVENUE
MIANI GARDENS FLORIDA 33/69
3. The mailing address (if different): /96/0 NW 37 AVENUE
WIANI ELOHDA 33055
4. Date of incorporation/qualification: 11/09/2005 Document number: POS 600 149706
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
_ VTERONICO Y. SYKTES Es o
19610 NW 37 AVENUE ARE TO
MIAMI FLOHDA FL US 33055 SER ~ F
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
DANE R BROWN
230 NE 171 ST STATST (P.O. Box NOT acceptable)
NORTH MIAMI BIFACH FLORIDA 33/62
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.
WM. DANE BROWN (P)
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) SULY 19 2006
(Signature of Registered Agent) (Date)
If signing on behalf of an entity:
(Typed or Printed Name)

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