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(Requestor's Name)				
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SECRETARY OF STATE DIVISION OF CORPORATIONS

PS 5/9/07
RAMO

COVER LETTER

TO: A	mendment S vivision of Co	ection orporations		
SUBJEC	т:	ey Graphix Inc. (Name of Corp.)	poration)	
DOCUM	ENT NUMI	BER: <u>PO 60000</u> 388.5	-	
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.				
Please ret	urn all corre	spondence concerning this matter to	the following:	
		Brent King	or CAROLE King	
		Key Graphix I	pany)	
27 v v 0		301 Balbas La (Addres	sae s)	
	Ą	pollo Brach FL (City/State and 2	33572 Zip Code)	
For further information concerning this matter, please call:				
_C+	<i>201e</i> (Name	of Confact Person)	at (8/3) 641-8883 (Area Code & Daytime Telephone Number)	
Enclosed	is a \$35.00 c	heck made payable to the Departme	ent of State.	
	X	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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, o	
statement of change is submitted for a corporation organized under the	
in order to change its registered office or registered agent, or	both, in the State of Florida.
1. The name of the corporation: Key Graphix]	nc.
2. The principal office address: 6301 Balbon 1	ane 33-0-
3. The mailing address (if different):	PL 335/2
4. Date of incorporation/qualification: Jan 2007 Docume	nt number: <u>PO 60000</u> 38858
5. The name and street address of the current registered agent and regist Florida Department of State:	ered office on file with the
Daniela Balan, Legalzoon	n com Ine
7083 Hollywood Blad #	180
Los Angeles, CA 90028	- 25 N
6. The name and street address of the new registered agent (if changed) (if changed):	and /or registered office
Brent A. King	မ်ာ ု
6301 Bolbon Lane (P.O. Box NOT acceptable)	ـــــــــــــــــــــــــــــــــــــ
Apollo Barch, FL 33	بن 272
The street address of its registered office and the street address of the as changed will be identical.	
Such change was authorized by resolution duly adopted by its board authorized by the board, or the corporation has been notified in writing	of directors or by an officer so ng of the change.
Bren (Signature of an officer or director) Bren	(Printed or typed name and title)
I hereby accept the appointment as registered agent and agree to act I further agree to comply with the provisions of all statutes relative to of my duties, and I am familiar with and accept the obligation of my document is being filed merely to reflect a change in the registered of corporation has been notified in writing of this change.	t in this capacity. o the proper and complete performance position as registered agent. Or, if this ffice address, I hereby confirm that the
Esset A Kong (Signature of Registered Agent)	- 24-00
(Signature of Registered Agent)	(Date)
If signing on behalf of an entity:	
(Typed or Printed Name)	
* * * FILING FEE: \$35.00 * *	t #

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