P06000068542

·					
(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					
,					





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R.A. Change

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COVER LETTER

TO: Amendment Section Division of Corporations						
SUBJECT: Distinct Capital, Inc. (Name of C	orporation)					
DOCUMENT NUMBER: P06000068542						
The enclosed Statement of Change of Registered Offic	e/Agent and fee are submitted for filing.					
Please return all correspondence concerning this matter to the following:						
Christopher S. Ryle (Name of Co	ntact Person)					
Distinct Capital, Inc. (Firm/Company)						
2205 Lee Street (Address)						
Hollywood, FL 33020						
(City/State and Zip Code)						
For further information concerning this matter, please call:						
Christopher S. Ryle (Name of Contact Person)	at (954) 445-4280 (Area Code & Daytime Telephone Number)					
(Name of Contact Person)	(Area Code & Dayume 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 ch	e provisions of sections 607.05 nange is submitted for a corpoi ler to change its registered offi	ration organized	under the laws of the St	ate of Florida
1. The name of	f the corporation: Distinct Ca	apital, Inc.		
	al office address: 2205 Lee S			
		d, FL 33020		·
3. The mailing	address (if different):		<u></u>	
4. Date of inco	rporation/qualification: 05/1	5/2006	Document number: P	06000068542
	nd street address of the current artment of State:	registered agent	and registered office on	file with the
	CORPORATION SE	ERVICE CO	MPANY	
	1201 HAYS STRE	ET		Z001 NOV
	TALLAHASSEE FL	32301	· <u>.</u>	AHASSA AHASSA
6. The name ar (if changed):	nd street address of the new reg	gistered agent (if	changed) and /or registe	ered office FLORI
	Ryle, Christopher	S		28: 28: ORIG
	2205 Lee Street			77
	•	NOT acceptable)	,	
	Hollywood, FL 330	120		
as changed wil	ress of its registered office an Il be identical. vas authorized by resolution of the board, or the corporation			• •
Chan	To Por	C	hristopher S. Ryle	
	the appointment as register to the appointment as register to comply with the provision and I am familiar with and ac- cing filed merely to reflect a c as been notified in writing of		(Printed or typed n	ame and title)
Chin	took Reh	1	1/27/2007	
(S	Signature of Registered Agent)		(Date)	
If signing on b	ehalf of an entity:			
((Typed or Printed Name)			
	***1	filing fee: \$	35.00 * * *	

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