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COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Hooper- Swift Publications, Inc. (Name of Corporation)
DOCUMENT NUMBER: P0600069008
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:
Glenn Swift
(Name of Contact Person)
Hooper-Swift Publications Inc.
370 NW Alice Ave
Stuart FL 34994 (City/State and Zip Code)
For further information concerning this matter, please call: (Name of Contact Person) at (32) 636-9288 (Area Code & Daytime Telephone Number)
(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 Street Address: Amendment Section

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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

in order to change its registered office or registered agent, or both, in the State of Florida. 1. The name of the corporation: 2. The principal office address: 370 W Alice Ave Straft FL 34994 3. The mailing address (if different): 4. Date of incorporation/qualification: 515 06 Document number: PO600069008 5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: The principal office address of the current registered agent and registered office on file with the Florida Department of State: The principal office address (if changed) and /or registered office on file with the Florida Department of State: The principal office address (if changed) and /or registered office (if changed): The principal office address (if different): Show the principal office address of the current registered agent (if changed) and /or registered office (if changed):
3. The mailing address (if different): 4. Date of incorporation/qualification: 5/15/06 Document number: PO600069008 5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: Change FL 34981 6. The name and street address of the new registered agent (if changed) and /or registered office
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: 3473 Atlants Dr # 10 Ft. Pierce, FL 34981 6. The name and street address of the new registered agent (if changed) and /or registered office
Florida Department of State: GRM R, Swift 2472 Atlants Dr # 10 Ft. Pierce, FL 34981 6. The name and street address of the new registered agent (if changed) and /or registered office
1346-NW Alice Hve (P.O. Box NOT acceptable) Stuart, FL 34994
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. (Signature of an officer or frector) (Printed or typed name and title) 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) (Date)
(Typed or Printed Name)

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

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