

P06000087588

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

(Business Entity Name)

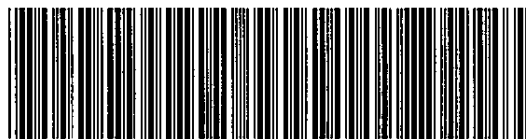
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Certified Copies _____

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FILED
2009 MAR 10 PM 2:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

R.A.

TB

3/12/09

GOLDEN POPPY, INC.
1370 HOMESTEAD RD
SANTA CLARA, CA 95050
415-939-6858

March 6, 2009

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

Re: Change of Registered Agent for Golden Poppy, Inc.
(Document Number P06000087588)

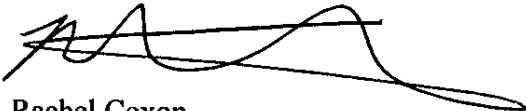
To Whom It May Concern:

Attached, please find a Statement of Change of Registered Office or Registered Agent or Both for Corporations, completed for Golden Poppy, Inc. (Document # P06000087588) in accordance with Florida Statute section 607.0502.

Included is a \$35.00 check made payable to the Department of State.

I ask that you please return a stamped copy of the change of agent form for my records. I have included a self-addressed stamped envelope and an additional copy of the change of agent form for your convenience.

Sincerely,

A handwritten signature in black ink, appearing to read 'Rachel Coxon', with a long horizontal flourish extending to the right.

Rachel Coxon
President, Golden Poppy, Inc.

**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, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of FLORIDA in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: GOLDEN POPPY, INC.
2. The principal office address: 1370 HOMESTEAD RD
SANTA CLARA, CA 95050
3. The mailing address (if different): _____
4. Date of incorporation/qualification: JUNE 28, 2006 Document number: P06000087588
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

RACHEL TAKO

12455 KEYSTONE ISLAND DR

NORTH MIAMI, FL 33181

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

JACKI TAKO

12455 KEYSTONE ISLAND DR

(P.O. Box NOT acceptable)

NORTH MIAMI, FL 33181

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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 director)

RACHEL COXON, PRESIDENT
(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)

MARCH 6, 2009
(Date)

If signing on behalf of an entity:

(Typed or Printed Name)

***** 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)