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DEPARTMENT OF STATE DEPARTMENT OF STATE OF CORPORATION 2: 5
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1007 1 Linded FILLING

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ACCOUNT NO. : 072100000032					
REFERENCE : 755477 7571083					
AUTHORIZATION: Spelle Race					
COST LIMIT : \$35.00					
ORDER DATE : February 12, 2007					
ORDER TIME : 11:59 AM					
ORDER NO. : 755477-005					
CUSTOMER NO: 7571083					
CHANGE OF AGENT					
NAME: SECRET'S PURITY, INC.					
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:					
XX PLAIN STAMPED COPY					
CONTACT PERSON: Dina Davis EXT# 2910 Thank you!					
EXAMINER:					

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	or ovisions of sections 607.0502, 617 0502, 6 nge is submitted for a corporation organized r to change its registered office or registered	d under the law	s of the State of			
1. The name of t	he corporation: SECRET'S PURITY, INC					
2. The principal office address: #1214 EAGLES NEST LANE MONROEVILLE,					5146	<u>; </u>
3. The mailing a	ddress (if different):					
4. Date of incorp	oration/qualification: 11/22/2006	_ Document n	umber: <u>P0600014</u>	6447		
	street address of the current registered agen tment of State:	t and registered	office on file with the			
	KFIR D. ASULIN					
	3700 CAPITAL CIRCLE S.	E.#1014				
	TALLAHASSEE, FL 32311			TA	201	
6 The name and (if changed):	street address of the new registered agent (i	f changed) and	/or registered office	LLAHAS	2007 FEB 13 PM	
	Corporation Service Company			SSEE	3	ר ר
	1201 Hays Street			E S	PH -	
	(PO Box NOT acceptable)			SRIE REE	: 43	
	Tallahassee, FL 32301			A		
The street addre as changed will	ss of its registered office and the street add be identical	iress of the bus	siness office of its regi	stered ag	ent,	
Such change wa authorized by th	s authorized by resolution duly adopted by e board, or the corporation has been notifi	y its board of d ed in writing o	irectors or by an office f the change.	er so		
Gignatu	HTC) re of an officer or director)	KFIR D. (Prin	ASULIN, PRES	IDENT		
of my duties, and document is being corporation has	the appointment as registered agent and a o comply with the provisions of all statutes of a land and accept the obligation of the amount of the register of the property of this change. See the company Securice Company	gree to act in t s relative to the tion of my post egistered office	his capacity. e proper and complete tion as registered age e address, I hereby com	perform nt Or if nfirm that	ance this the	
Ву:		2-1	2-0')			
	nature of Registered Agent) half of an entity:		(Date)		-	
JEFFREY (S-LBLN yped 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)