

P07000027145

Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850) 205-0380

From:
Account Name : CORPDIRECT AGENTS, INC.
Account Number : 110450000714
Phone : (850) 222-1173
Fax Number : (850) 224-1640

RA2052.65119

FILED
07 MAR 13 PM 1:03
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

REGISTERED AGENT CHANGE

FAUX BELLA FINISHES, INC.

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$35.00

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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: Faux Bella Finishes, Inc.
2. The principal office address: 4512 Andrew Jackson Way, Tallahassee, FL 32303
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 03-01-2007 Document number: P07000027145
5. The name and street address of the current registered agent and registered office on file with the
Florida Department of State:

Teresa J Rogers

4512 Andrew Jackson Way

Tallahassee, FL 32303

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

CorpDirect Agents, Inc.

515 East Park Avenue

(P.O. Box NOT acceptable)

Tallahassee, FL 32301

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.

Teresa J Rogers
(Signature of an officer or director)

Teresa J. Rogers, Pres.
(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.

Cristal Harris
(Signature of Registered Agent)

03-08-2007

(Date)

If signing on behalf of an entity:

Cristal Harris - Assistant Secretary

(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)

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