P07000125451

(Re	questor's Name)		
(Ad	dress)		
(Ad	dress)		
(Au	uiessy		
(Cit	ty/State/Zip/Phon	e #)	
PICK-UP	MAIT	MAIL	
(Bu	siness Entity Na	me)	
(Document Number)			
Certified Copies	_ Certificate	s of Status	
Special Instructions to	Filing Officer:		

Office Use Only



000136195640

10/01/08--01016--022 **35.00

FILED

08 OCT -1 PM 1: 16

DECRETARY OF STATE

men jour

COVER LETTER · ·

Amendment Section Division of Corporations

SUBJECT: Urban Togz Inc. (Name of Corporati	tion)			
DOCUMENT NUMBER: P07000125451				
The enclosed Statement of Change of Registered Office/Agen	t and fee are submitted for filing.			
Please return all correspondence concerning this matter to the	following:			
Koudy, hich	am			
(Name of Contact Person)				
Urban Togz	Inc.			
Urban Togz (Firm/Company	<i>y</i>)			
602 NW 1st	St.			
(Address)				
Dania Beach, FL. 33004				
(City/State and Zip	Code)			
For further information concerning this matter, please call:	•			
Koudy Hishom	054 \ 500 5220			
Koudy, Hicham at ((Name of Contact Person)	954) 588 5238 (Area Code & Daytime Telephone Number)			
Enclosed is a \$35.00 check made payable to the Department of	of State.			
Mailing Address: Amendment Section	Street Address: Amendment Section			
Division of Corporations	Division of Corporations			
P.O. Box 6327	Clifton Building			
Tallahassee, FL 32314	2661 Executive Center Circle			

Tallahassee, FL 32301

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

statement of cha	nge is submitted for a corporation	7.0502, 607.1508, or 617.1508, Florida Statutes, organized under the laws of the State of Florida registered agent, or both, in the State of Florida.		
1. The name of t	he corporation: <u>Urban Togz In</u>	С.		
2. The principal	office address: 602 NW 1st St.	Dania Beach FL, 33004		
3. The mailing a	ddress (if different):			
4. Date of incorp	poration/qualification: 11/20/07	Document number: P0700012545	51	
	I street address of the current regist treent of State: (If resigned, enter re	ered agent and registered office on file with the esigned)		
	1806 S Dixie Hwy. Lake We	orth Fl. 33460	08 0CT - I	η =
6. The name and (if changed):	i street address of the new registere 602 NW 1st St. Dania Beac		PH 1:16	ח כ
		pal Address to the above one)		
		street address of the business office of its regist adopted by its board of directors or by an officer een notified in writing of the change.		
(Signat	ure of an officer or director)	Koudy, Hicham (Printed or typed name and title)		
I hereby accept I further agree of my duties, ar	· ·	ent and agree to act in this capacity all statutes relative to the proper and complete p he obligation of my position as registered agent be in the registered office address. I hereby confi	performance t. Or, if this irm that the	
· · · · · · · · · · · · · · · · · · ·	<u> </u>	09/29/2008		
,	gnature of Registered Agent)	(Date)		
(Typed or Printed Name)	-		

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