

P08 0000008099

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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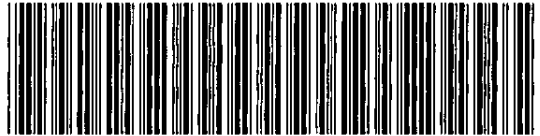
(Business Entity Name)

(Document Number)

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*RA Change
There is
12-19-08*

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Studio Monkeyz Publishing, Inc.
(Name of Corporation)

DOCUMENT NUMBER: P08000008099

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:

Marjorie Klein, Esq.
(Name of Contact Person)

Law Office of Allen Jacobi
(Firm/Company)

11077 Biscayne Blvd., Suite 200
(Address)

Miami, FL 33161
(City/State and Zip Code)

For further information concerning this matter, please call:

Marjorie Klein, Esq. at (305) 893-5644
(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
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 5, 2008

MARJORIE KLEIN, ESQ.
LAW OFFICE OF ALLEN JACOBI
11077 BISCAYNE BLVD., SUITE 200
MIAMI, FL 33161

SUBJECT: STUDIO MONKEYZ PUBLISHING, INC.
Ref. Number: P08000008099

We have received your document for STUDIO MONKEYZ PUBLISHING, INC. and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The registered agent designated must be an active Florida or foreign corporation, limited liability company or fictitious name authorized to transact business in Florida. Please correct the document accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6905.

Thelma Lewis
Document Specialist Supervisor

Letter Number: 908A00059329

**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: Studio Monkeyz Publishing, Inc.
2. The principal office address: 20533 Biscayne Blvd., Suite 304, Aventura, FL 33180
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 1/22/2008 Document number: P08000008099
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)

Karlen Moodliyar

20533 Biscayne Blvd., Suite 304

Aventura, FL 33180

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

~~Law Office of Allen Jacobi~~ Marjorie Klein, Esq.

11077 Biscayne Blvd., Suite 200

(P.O. Box NOT acceptable)

Miami, FL 33161

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)

Karlen Moodliyar, 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)

11-25-08

(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)

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