P08000044005

(Re	questor's Name)					
(Address)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP	☐ WAIT	MAIL MAIL				
(Business Entity Name)						
(Do	cument Number)					
Certified Copies	_ Certificates	s of Status				
Special Instructions to Filing Officer:						
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Office Use Only



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FILED 2008 MAY 15 AM 11: 29 SECRETARSEE, FLORIDA

R.A. Change

TB 5-22-08

COVER LETTER

TO: Amendment Section Division of Corporations							
SUBJECT: Palm Beach Academy of The DEcorative Arts							
(Name of Corporation)							
DOCU	MENT NUMBER: P08000044005						
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:						
Matthew S. Taylor							
	(Name of Contact Person)						
	Matthew S. Taylor, P.A.						
	(Firm/Company)						
	13077 164th Court North						
	(Address)						
	Jupiter, FL 33478						
(City/State and Zip Code)							
For fu	rther information concerning this matter, please call:						
M	latthew S. Taylor at (561) 743-1505 (Name of Contact Person) (Area Code & Daytime Telephone Number)						
	(Number of Contact Forson) (New Code & Sayumo Forson Number)						
Enclosed is a \$35.00 check made payable to the Department of State.							
	Mailing Address: Amendment Section Street Address: Amendment Section						
	Division of Corporations Amendment Section Division of Corporations						
	P.O. Box 6327 Clifton Building						
	Tallahassee, FL 32314 2661 Executive Center Circle						
	Tallahaccee FL 32301						

ग्रुधका 📜

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

	provisions of sections 607.0502,						
	13e is submitted for a corporatio to change its registered office o						
1. The name of the	e corporation: Palm B	each Academy of	the Decorative	Arts, Inc.			
2. The principal office address: 1241 Pine Island Road, Singer Island, FL 33404							
3. The mailing ac	Idress (if different): Sa	me	,				
4. Date of incorp	eration/qualification: April	30, 2008 Docume	nt number: P080	000044005			
	street address of the current regionent of State:	istered agent and regist	ered office on file with	n the			
	Filings, In	c.					
	3732 NW 16t	h Street		TALE TALE			
	Fort Lauder	dale, FL 33311		2008 MAY 15 SECRETARS TALLARIASS			
6. The name and (if changed):	street address of the new registe	ered agent (if changed)	and /or registered offi	S AM 11: 29 SEE: FLORID 8			
	Brenda	Kilgore		15. 29 DRIFT ORNE			
		ne Island Road					
	(P.O. Box NOT	•	٠.				
		Island, FL 3340		-			
The street address as changed will	ss of its registered office and the be identical.	ne street address of the	business office of its	s registered agent,			
Such change wa authorized by th	s authorized by resolution duly e board, or the corporation has	adopted by its board been notified in writi	of directors or by an ng of the change.	officer so			
July	Kily		Kilgore				
	re ovan opticer or director)		(Printed or typed name and t	itie)			
I hereby accept I further agree t of my duties, and document is bein corporation has	the appointment as registered a o comply with the provisions o d I am familiar with and accep ng filed merely to reflect a cha oeen notified in writing of this	gen and agree to del f all statutes relative t t the obligation of my nge in the registered of change.	o the proper and composition as registered fifties address, I hereb	plete performance Tagent. Or, if this by confirm that the			
Duly (Sig	insture of Registered Agent)		5/7/200 (Date)	<u>8</u>			
If signing on be	half of an entity:						
Brenda Ki	lgore yped or Printed Name)	_					

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