

P08000045111

THE WORKSHOP ORLANDO, INC
5014 FORSYTH COMMERCE RD
ORLANDO, FL 32807

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

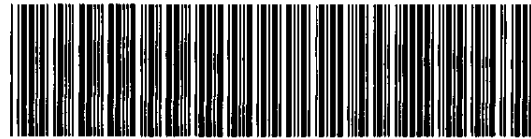
(Business Entity Name)

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DIVISION OF CORPORATIONS
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Amer
C.COULLETTE

JUN 02 2011

EXAMINER

**ARTICLES OF AMENDMENT
TO
ARTICLES OF INCORPORATION
OF**

**THE WORKSHOP ORLANDO, INC
P08000045111**

Pursuant to the provisions of Section 607-1006, Florida Statutes, this Florida profit corporation adopts the following articles of amendment to its articles of incorporation:

FIRST: Amendment(s) adopted: (indicate article number (s) being amended, added, or deleted)

ARTICLE II

The principal place of business address:

5014 FORSYTH COMMERCE RD
ORLANDO, FL 32807

CHANGE

The mailing address of the corporation is:

5014 FORSYTH COMMERCE RD
ORLANDO, FL 32807

CHANGE

ARTICLE V

The name and Florida Street address of the register agent is:

RYAN W. PETERSEN
7902 AUTUMN WOOD DR
ORLANDO, FL 32825

DELETE

ANDREW E. ESCOBAR
2025 SHADYHILL TERRACE
WINTER PARK, FL 32792

ADD

ARTICLE VII

The name of officer(s) and/or director(s) of the corporation is/are:

Title: P
RYAN W. PETERSEN
7902 AUTUMN WOOD DR
ORLANDO, FL 32825

DELETE

Title: P
ANDREW E. ESCOBAR
2025 SHADYHILL TERRACE
WINTER PARK, FL 32792

ADD

**FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
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CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501,
FLORIDA STATUTES, THE UNDERSIGNED CORPORATION
ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA
SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE
REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF
FLORIDA.

1. THE NAME OF THE CORPORATION IS:

THE WORKSHOP ORLANDO, INC

**2. THE NAME AND ADDRESS OF THE REGISTERED
AGENT/REGISTERED OFFICE IS:**

ANDREW E. ESCOBAR
2025 SHADYHILL TERRACE
WINTER PARK, FL 32792

HAVING BEEN NAMED THE REGISTERED AGENT/REGISTERED
OFFICE AND TO ACCEPT SERVICE OF PROCESS FOR THE
ABOVE STATED CORPORATION AT THE PLACE DESIGNATED
IN THIS CERTIFICATE, 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 RELATING TO THE PROPER AND COMPLETE
PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH
AND ACCEPT THE OBLIGATIONS OF MY POSITION ON AS
REGISTERED AGENT.

X 
REGISTERED AGENT SIGNATURE

5/4/2011
DATE