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COVER LETTER

TO:

Amendment Section Division of Corporations

SUBJECT: FUNNY SHOP, INC.

Name of Corporation

DOCUMENT NUMBER: P08000051463

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:

Joseph H. Brown

Name of Contact Person

Blount Law, PL

Firm/Company

809 Walkerbilt Road, Suite 6

Address

Naples, FL 34110

City/State and Zip Code

jbrown@blountlaw.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Joseph H. Brown

Name of Contact Person

Name of Contact Person

Area Code & Daytime Telephone Num

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

CR2E045 (03/12)

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: FUNNY SHOP, INC.
2. The principal office address: 1100 6TH AVENUE SOUTH, Suite 5 NAPLES, FL 34102
3. The mailing address (if different):
4. Date of incorporation/qualification: 05/22/2008 Document number: P08000051463
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)
LESCHMANN, HANS-JUERGEN, PSD
12891 BRYNWOOD PRESERVE LANE
NAPLES, FL 34105
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
ALLURE ACCOUNTING, INC.
3665 BONITA BEACH ROAD, Suite 1-3
P.O. Box NOT acceptable BONITA SPRINGS, FL 34134
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.
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 Regulatored Agent Date
If signing on behalf of an entity:
Marcan Loeffles 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 (03/12)