P08000068 320

(Requestor's Name)
(Address)
	Address)
(City/State/Zip/Phone #)
PICK-UP	WAIT MAIL
	Business Entity Name)
(Document Number)
Certified Copies	Certificates of Status
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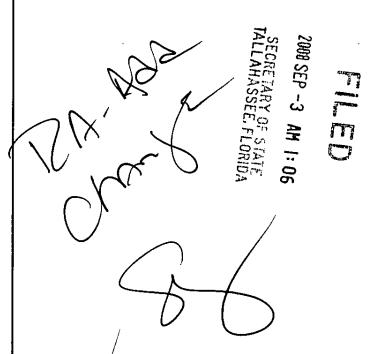


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COVER LETTER

TO:	Amendment Section Division of Corporations	
SUBJI	ECT: Contempo Design Group Inc. (Name of Cor	poration)
DOCU	JMENT NUMBER: P08000068320	
The en	iclosed Statement of Change of Registered Office/A	Agent and fee are submitted for filing.
Please	return all correspondence concerning this matter to	the following:
	Elizabeth Vaudreuil (Name of Conta	act Person)
	Contempo Design Group Inc. (Firm/Com	pany)
	3627 SW 87th. Dr. (Address	es)
	Gainesville, FL 32608	
	(City/State and	Zip Code)
For fur	ther information concerning this matter, please cal	l:
Elizab	eth Vaudreuil (Name of Contact Person)	at (352) 514-7937 (Area Code & Daytime Telephone Number)
Enclos	ed is a \$35.00 check made payable to the Departme	ent 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

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

statement of cha	provisions of sections 607.0302, 617.0302, 607.1308, or 617.1308, Florida Statutes, this nge is submitted for a corporation organized under the laws of the State of Florida rto change its registered office or registered agent, or both, in the State of Florida.
1. The name of t	he corporation: Contempo Design Group Inc.
2. The principal	office address: 3627 SW 87th. Dr., Gainesville FL 32608
3. The mailing a	ddress (if different):
4. Date of incorp	poration/qualification: 7/18/2008 Document number: P08000068329
	street address of the current registered agent and registered office on file with the treet of State:
	Elizabeth Vaudreuil
	4031 NW 97th. Blvd, Suite C
	Gainesville FL 32606
6. The name and (if changed):	I street address of the new registered agent (if changed) and /or registered office AHE AAR SEP -3
	3627 SW 87th. Dr. (P.O. Box NOT acceptable)
	Gainesville, FL 32608
The street addre	ess of its registered office and the street address of the business office of its registered agent, be identical.
Such change wa authorized by th	as authorized by resolution duly adopted by its board of directors or by an officer so he board, or the corporation has been notified in writing of the change.
Mgnati.	Elizabeth Vaudreuil, President (Printed or typed name and title)
I hereby accept I further agree to of my duties, an document is bei corporation has	the appointment as registered agent and agree to act in this capacity. to comply with the provisions of all statutes relative to the proper and complete performance d I am familiar with and accept the obligation of my position as registered agent. Or, if this ng filed merely to reflect a change in the registered office address, I hereby confirm that the been notified in writing of this change.
Ging!	relature of Registered Agent) O8/26/08 (Date)
	half of an entity:
(7)	Typed or Printed Name)

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