

P08000097459

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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12-30-09

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: CL22 DESIGNS, INC.
Name of Corporation

DOCUMENT NUMBER: P08000097459

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:

Cynthia M. Lopez-Brennan
Name of Contact Person

CL22 Productions
Firm/Company

4548 South Suncoast Blvd., Suite 111
Address

Homosassa, Florida 34446
City/State and Zip Code

clopell@cl22productions.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Cynthia M. Lopez-Brennan at (352) 628-2522
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 17, 2009

CYNTHIA M LOPEZ-BRENNAN
CL22 PRODUCTIONS
4548 S SUNCOAST BLVD STE 111
HOMOSASSA, FL 34446

SUBJECT: CL22 DESIGNS INC.
Ref. Number: P08000097459

We have received your document for CL22 DESIGNS INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

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) 245-6925.

Teresa Brown
Regulatory Specialist II

Letter Number: 609A00038451

RECEIVED
DEC 24 AM 8:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**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: CL22 DESIGNS INC.
2. The principal office address: 4548 South Suncoast Blvd., Suite 111
Homosassa, Florida 34446
3. The mailing address (if different): same
4. Date of incorporation/qualification: October 29, 2008 Document number: P08000097459
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)

Spiegel & Utrera, PA

1840 S.W. 22nd Street, 4th Floor

Miami, Florida 33145

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

Cynthia M. Lopez-Brennan

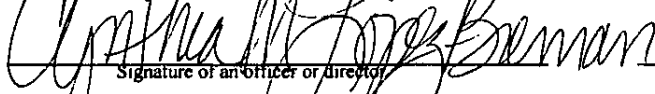
4548 South Suncoast Blvd., Suite 111

P.O. Box NOT acceptable

Homosassa, Florida 34446


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.



Cynthia M. Lopez-Brennan, Pres.

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.



December 10, 2009

Date

If signing on behalf of an entity:

Cynthia M. Lopez-Brennan, Pres.

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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TALLAHASSEE, FLORIDA