

PO 80000101130

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

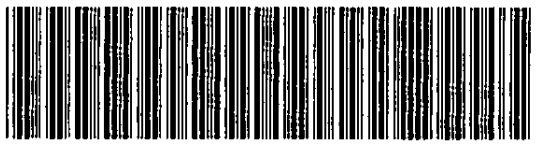
(Business Entity Name)

(Document Number)

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@ 6/17/10

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: PORK CHOP AIRBRUSH INC.
Name of Corporation

DOCUMENT NUMBER: PO8000101130

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:

DENIS HAZEL
Name of Contact Person

PORK CHOP AIRBRUSH INC.
Firm/Company

3229 ALEXANDER AV.
Address

FORT PIERCE, FL. 34982
City/State and Zip Code

PORKCHOPAIRBRUSH@HOTMAIL.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

DENIS HAZEL at (772) 595-5888
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

June 8, 2010

DENIS HAREL
PORK CHOP AIRBRUSH INC.
3229 OLEANDER AVE.
FORT PIERCE, FL 34982

SUBJECT: PORK CHOP AIRBRUSH INC.
Ref. Number: P08000101130

We have received your document for PORK CHOP AIRBRUSH 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):

You failed to make the correction(s) requested in our previous letter.

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

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) 245-6964.

Irene Albritton
Regulatory Specialist II

Letter Number: 110A00014134

RECEIVED
JUN 17 11:00 AM '10



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 21, 2010

DENIS HAREL
PORK CHOP AIRBRUSH INC.
3229 OLEANDER AVE
FORT PIERCE, FL 34982

SUBJECT: PORK CHOP AIRBRUSH INC.
Ref. Number: P08000101130

We have received your document for PORK CHOP AIRBRUSH 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 application/form submitted does not meet the requirements of this office; please complete the attached application/form.

~~We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.~~

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) 245-6964.

Irene Albritton
Regulatory Specialist-II

Letter Number: 110A00012940

RECEIVED
MAY 23 2010
CORPORATION DIVISION
TALLHASSEE, 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: POPK CROP AIRBRUSH INC.
- 2. The principal office address: ~~3229~~ 3229 OLEANDER AVE. FORT PIERCE, FL. 34982
- 3. The mailing address (if different): SAME

4. Date of incorporation/qualification: 11/12/2008 Document number: PO8000101130

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)

RESIGNED { WRAI SERVICES INC.
2731 EXECUTIVE PARK DRIVE, SUITE 4
WESTON, FL. 33331 US } RESIGNED

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

DENIS HAREL
5015 PALMETTO DR.
P.O. Box NOT acceptable
FORT PIERCE, FLORIDA 34982

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TALLAHASSEE, FLORIDA
10 JUN 17 PM 2:50

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.

[Signature]
Signature of an officer or director

DENIS HAREL
Printed or typed name and title

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]
Signature of Registered Agent

MAY 24 / 2010
Date

If signing on behalf of an entity:

Typed or Printed Name

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