

# P08000104640

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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H10000009458ABC.

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

REGISTERED AGENT CHANGE  
PHAT TAPE, INC.

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$35.00

*PA Change*

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Corporate Filing Menu

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H10000009458

**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: Phat Tape, Inc.
2. The principal office address: 3787 Palm Valley Road, #102-327, Ponte Vedra Beach, FL 32082
3. The mailing address (if different): \_\_\_\_\_

4. Date of incorporation/qualification: 12/10/2008 Document number: P08000104640

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)

John S. Duss, IV, Esq.

10110 San Jose Boulevard

Jacksonville, Florida 32257

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

John S. Duss, IV, Esq.

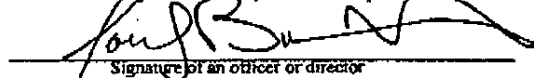
4348 Southpoint Boulevard, Suite 101

P.O. Box NOT acceptable

Jacksonville, Florida 32216

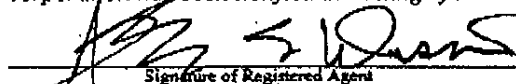
The street address of its registered office and the street address of the business office of its registered agent,  
as changed will be identical.

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 of an officer or director

CEO  
\_\_\_\_\_  
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 of Registered Agent

1-14-2010  
\_\_\_\_\_  
Date

If signing on behalf of an entity:

\_\_\_\_\_  
Typed or Printed Name

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

H10000009458

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE  
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

CR2E045 (8/05)

Prepared by: John S. Duss, IV

4348 Southpoint Blvd., Ste. 101

Jacksonville, FL 32216 FL Bar No. 0104019 Tel: (904) 543-4300