P09458

(Requestor's Name)				
(Address)				
(
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
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COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT:	Style Crest Tra	ansport, Inc.			
	Name of (Corporation			
DOCUMENT NUMBER:		P09458			
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:					
•					
	Juli G	Syurica			
	Name of Co	Syurica ontact Person			
Style Crest Inc.					
Firm/Company					
2450 Enterprise Street, Drawer A					
Address					
Fremont, OH 43420 City/State and Zip Code					
City/State and Zip Code					
iuli.gvurica@stylecrest.net					
juli.gyurica@stylecrest.net E-mail address: (to be used for future annual report notification)					
For further information concern	ning this matter, please	call:			
Juli Gyu	rica	at (419) Area Code & Daytime 7	333-5652		
Name of Contac	ot Person	Area Code & Daytime 7	elephone Number		
Enclosed is a \$35.00 check made payable to the Department of State.					
<u>Mailin</u> Amen	g Address: dment Section	Street Address: Amendment Section	n		

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

CR2E045 (8/05)

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, Florid statement of change is submitted for a corporation organized under the laws of the State of in order to change its registered office or registered agent, or both, in the State of	of Ohio
1. The name of the corporation: Style Crest Transport, Inc.	
2. The principal office address: 5001 Gateway Blvd, Unit 10, Lakeland, FL 33	811
3. The mailing address (if different): 2450 Enterprise Street, Drawer A, Fremon	it, OH 43420
4. Date of incorporation/qualification: 3/19/1986 Document number:	P09458
5. The name and street address of the current registered agent and registered office on file Florida Department of State: (If resigned, enter resigned)	with the
Phillip Burton	<u> </u>
5001 Gateway Blvd, Unit 10	12 FE
Lakeland, FL 33811	B 21
6. The name and street address of the new registered agent (if changed) and /or registered (if changed):	office PH 2:
Tyrone G Frantz	
5001 Gateway Blvd, Unit 10	···
P.O. Box NOT acceptable	
Lakeland, FL 33811	
The street address of its registered office and the street address of the business office of as changed will be identical.	f its registered agent,
Such change was authorized by resolution duly adopted by its board of directors or by authorized by the board, or the corporation has been notified in writing of the change.	an officer so
Tyrone G Frant Signature of anothicer or dector Printed or typed name an	
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 c of my duties, and I am familiar with and accept the obligation of my position as registed document is being filed merely to reflect a change in the registered office address, I here corporation has been notified in writing of this change. Signature of Registered Agent	
If signing on behalf of an entity: Type G Fran / Z Typed or Printed Name	

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