

Dec. 20. 2011 10:50AM

No. 6230 Pg. 1 of 1

P10000038016

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:
Division of Corporations
Fax Number : (850) 617-6380

From:
Account Name : HAILE, SHAW & PFAFFENBERGER, P.A.
Account Number : 076326003550
Phone : (561) 627-8100
Fax Number : (561) 622-7603

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: dan@cardinventors.com

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TALLAHASSEE, FLORIDA

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TALLAHASSEE, FLORIDA

REGISTERED AGENT CHANGE
CARD INVENTORS, INC.

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

RAC Change

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12/20/11 DC

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: CARD INVENTORS, INC.
2. The principal office address: 950 Peninsula Corp Circle, Suite 2000, Boca Raton, FL 33487
3. The mailing address (if different): _____

4. Date of incorporation/qualification: 05/03/10 Document number: P10000038016

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)

Kenneth Edelman

2255 Glades Road, Suite 337W

Boca Raton, FL 33431

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

HAILE SHAW & PFAFFENBERGER

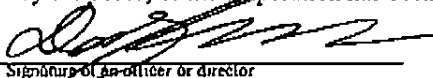
660 US Highway One, 3rd Floor

P.O. Box NOT acceptable

North Palm Beach, FL 33408

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

Dan Zhou

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

12/8/11

Date

If signing on behalf of an entity:

Philip M. DiComo

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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