

P11000/00751

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

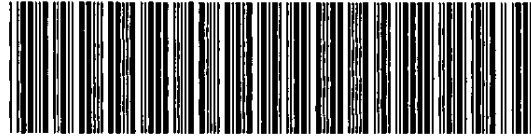
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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12 JUL 13 AM 9:00
SECRETARY OF STATE
HALL ASSESSMENT

JUL 16 2012

T. ROBERTS



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED
DIVISION OF CORPORATIONS
JUL 13 2012

2012 JUL 13 AM 8:03

RECEIVED
TO REGISTER
SUFFICIENCY OF FILING

July 2, 2012

CHRISTOPHER J. ROTE
GLOBAL AFFINITY
12865 SW HWY 17, 385
ARCADIA, FL 34269

SUBJECT: GLOBAL AFFINITY INC.
Ref. Number: P11000100751

We have received your document for GLOBAL AFFINITY 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):

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 complete block # 6.

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) 245-6050.

Tina Roberts
Regulatory Specialist II

Letter Number: 412A00017934

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Global Affinity
Name of Corporation

DOCUMENT NUMBER: P11000100751

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:

Christopher J. Rote
Name of Contact Person

Global Affinity
Firm/Company

12865 S.W. Highway 17, 385
Address

Arcadia, FL 34269
City/State and Zip Code

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

For further information concerning this matter, please call:

Chris Rote at 941, 286-0936
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

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 _____

_____ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Global Affinity Inc.

2. The principal office address: 12065 S.W. Highway 17, 385
ARCADIA, FL 34269

3. The mailing address (if different): _____

4. Date of incorporation/qualification: 11/19/11

Document number: P1000100751

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)

Christopher J Rote
11019 SW Cypress Bend Ave
ARCADIA, FL 34269

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

Christopher J. Rote
12065 S.W. Highway 17, 385
ARCADIA, FL 34269

P.O. Box NOT acceptable

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

Christopher J Rote - President
(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

6-7-12
Date

If signing on behalf of an entity:

Christopher J. Rote
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

FILED
JUL 13 AM 9:00
TALLAHASSEE FLORIDA
SECRETARY OF STATE