P12000027230

(Re	questor's Name)	
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(Cit	ty/State/Zip/Phone	e #)
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SECRETARY OF STATE

WS JOLKTALY JEC DBATHATA

PAChang

2-26-13



TION SERVICE COMPANY						
ACCOUNT NO. : 12000000195						
REFERENCE : 938187 8941A						
AUTHORIZATION :						
COST LIMIT: \$ 35 Spelle Reman						
ORDER DATE : December 23, 2013						
ORDER TIME : 11:40 AM						
ORDER NO. : 938187-005						
CUSTOMER NO: 8941A						
CHANGE OF AGENT						
NAME: PAUL AMERICA INC.						
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:						
CERTIFIED COPY XX PLAIN STAMPED COPY						
CONTACT PERSON: Susie Knight EXT# 52956						
EXAMINER:						

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of se statement of change is submitted in order to change its t	d for a corporatio	u organiżed under the	laws of the State of F	orida		
	•		oni, in me state of 140	Fleiet.		
The name of the corporation: Paul America Inc. The principal office address: 5079 N Dixie Highway, Oakland Park, FL 33334						
3. The mailing address (if different						
4. Date of incorporation/qualific	ation: 03/20/20	Documen	P120000	27230		
 The name and street address of Plorida Department of State; (f the current regions of the following the f	tered agent and register resigned)	red office on file with t	the		
Bruce D Gr	Bruce D Green			ر (<u>) حق</u> (ا	A	
1313 S Andrews Avenue			-0 22		, p	
Fort Lauderdale FL 33316				302	€23	r
6. The name and street address of (if changed): Andrew Tree	the new registere				三里 55	j
	P (), Br	1525 NW 56 IX NOT receptable Ft. Lauder	th St. dale, FL 333	34 34	ņ	
The street address of its registere as changed will be identical.	d office and the s	treet address of the bu	siness office of its reg	istered agei	nt,	
Such change was authorized by reauthorized by the board, or the co	esolution duly address becomes become	opted by its board of d an notified in writing o	irectors or by an office f the change,			
Signature of an other or directe	fre	Andrew Tr	rentmann, Pres.			
I hereby accept the appointment of further agree to comply with the performance of my duties, and I agent. Or, if this document is being hereby confirm that the corporation	ns registered agen provisions of all m familiar with a ng filed merely to on has been notif	of and agree to act in the statutes relative to the und accept the obligation of the reflect a change in the led in writing of this cl	his capacity. e proper and complete on of my position as re e registered office add tange.	gistered ress, I		
Under Sian	the	October	, 2013			
Signature of Registered Ages If signing on behalf of an entity:	11		Dale			
Andrew Trentmann 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 (03/12)