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COVER LETTER

Division of Corporations CRYSTAL ART OF FLORIDA, INC SUBJECT:_ (Name of Corporation) P93000071571 DOCUMENT NUMBER:_ 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: **GLENN KNECHT** (Name of Contact Person) CRYSTAL ART OF FLORIDA, INC (Firm/Company) 3380 NW 114 STREET, SUITE 200 (Address) MIAMI, FL 33167 (City/State and Zip Code) For further information concerning this matter, please call: **GLADYS LLERENA** (Area Code & Daytime Telephone Number) (Name of Contact Person) Enclosed is a \$35.00 check made payable to the Department of State. Street Address: Amendment Section **Mailing Address:** Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314

TO:

Amendment Section



3380 NW 114 ST, SUITE 200, MIAMI, FL 33167 / Ph: (305) 885-5358 Fax: (305) 885-8731

Miami, March 16, 2007

Florida Department of State Amendment Section Division of Corporations PO Box 6327 Tallahassee, FL 32314

To Whom It May Concern:

Starting on April 2nd, 2007 the principal and mailing address for our company,

Document Number P93000071571 will change as follow:

CRYSTAL ART OF FLORIDA, INC

3380 NW 114 ST, SUITE 200

MIAMI, FL 33167

Please make the necessary changes.

If you have any questions, please feel free to contact me.

Thank you,

Randy Greenberg

DVP

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

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	provisions of sections 607.0502, 617.050 nge is submitted for a corporation orga			
	r to change its registered office or regist			
1. The name of the	he corporation: CRYSTAL ART OF F	LORIDA, INC.		
2. The principal	office address: 3380 NW 114 STREE	Γ, SUITE 200		
3. The mailing a	ddress (if different):			<u> </u>
4. Date of incorp	poration/qualification: 10/07/1993	Document nu	ımber: P93	3000071571
	street address of the current registered attent of State:	agent and registered	office on file wi	th the
	GLENN K	NECHT		<u> </u>
. ;-	725 SE 91	H COURT	A STATE OF STATE	
	HIALEAH,	FL 33010	,	07/ SEC)
6. The name and (if changed):	street address of the new registered age	ent (if changed) and	or registered off	HAR 22 HAR 22 HAR 22 AHASSE
	GLENN KN	ECHT		_ E P M
	3380 NW 114 STRE	ET, SUITE 200		STATE ORID
	(P.O. Box NOT acceptable			97 DA
	MIAMI, FL	. 33167	 =	04
The street addre	ess of its registered office and the stree be identical.	t address of the bus	iness office of i	ts registered agent,
Such change wa authorized by th	as authorized by resolution duly adopte board, or the corporation has been n	ed by its board of dotified in writing o		
	re of an officer or director)	(Print	ed or typed name and	title)
I hereby accept I further agree to of my duties, an document is bein corporation has	the appointment as registered agent a to comply with the provisions of all sta d I am familiar with and accept the ob ng filed merely to reflect a change in t s been notified in writing of this chang	nd agree to act in t tutes relative to the ligation!of my posi he registered office e.	his capacity. e proper and cor tion as registere address, I here	nplete performance ed agent. Or, if this by confirm that the
M	-711-		3/16/2007	
(Sig	mature of Registered Agent) .		(Date)	
If signing on be	half of an entity:	· -	-	•
				•
(T	'yped or Printed Name)		•	
	* * * FILING F	EE: \$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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