## P94 0000 46009

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(Address)					
(Address)					
(City/State/Zip/Phone #)					
(only/old/orzhon mono m)					
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## **COVER LETTER**

TO: Amendment Section Division of Corporations Tampoprint International Corporation Name of Corporation P94000046009 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. Klein Name of Contact Person Baur & Klein PA Firm/Company 100 N Biscayne Blvd, Suite 2100 Miami, FL 33132 City/State and Zip Code cklein@worldwidelaw.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Christopher J. Klein at (305) 377-3561
Area Code & Davtime Telephone Number Name of Contact Person

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

statement of cha	provisions of sections 607,0502, 617,0502, 607,1508, or 617,1508, Florida , inge is submitted for a corporation organized under the laws of the State of <u>.</u> ir to change its registered office or registered agent, or both, in the State of I	Florida	this	
1. The name of	the corporation: Tampoprint International Corporation			
2. The principal	office address: 1400 26th Street ich, FL 32960-0311			
3. The mailing	address (if different):			
4. Date of incor	poration/qualification: 06/16/1994 Document number: P9400	00460	)09	<del></del>
	d street address of the current registered agent and registered office on file writment of State: (If resigned, enter resigned)	ith the		
	Andreas Mayer		20	
	1400 26th Street	-1V.L. 30 611		
	Vero Beach, FL 32960		2019 OCT - 2	 e
6. The name an (if changed):	d street address of the new registered agent (if changed) and /or registered of	ffice S	) PH 2: I	
	Registerzentrale LLC	:	Q	
	100 N Biscayne Blvd, Suite 2100			
	P.O Box NOT acceptable  Miami, FL 33132			
The street addr	ess of its registered office and the street address of the business office of it be identical.	s registe	red agent	
Such change w	as authorized by resolution duly adopted by its board of directors or by an he board, or the corporation has been notified in writing of the change.	officer s	O	
,	re of an officer or director  X  Andrew  Meeting and tit  Printed or typed name and tit	400	Presi	de _ t
I further agree	the appointment as registered agent and agree to act in this capacity, to comply with the provisions of all statutes relative to the proper and commy duties, and I am familiar with and accept the obligation of my position is document is being filed merely to reflect a change in the registered office that the proper time has been notified in writing of this change.	e addres	stered ss, I	
- Su	MM SPA 24, 20 nature of Registered Agent Date	19		
•	that f of an entity:			
, i	Mr. J. Kloin			
<del></del>	vped or Printed Name			

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

X