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FILED SECRETARY OF STATE SIVISION OF CORPORATIONS

C.COULLIETTE
SEP 14 2010

**EXAMINER** 

## **COVER LETTER**

TO: Amendment Section Division of Corporations				
SUBJECT: SOUTH FLORIDA DECOR, INC  Name of Corporation				
DOCUMENT NUMBER: 7 96 0000 4 4 4 2 9				
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:				
RANdoLph HAM Name of Contact Person				
SOUTH FloridA DECOR, INC				
Firm/Company				
13820 LAKE CLAIR COURT				
HIAMI LAKES, FL 33014  City/State and Zip Code				
E-mail address: (to be used for future annual report notification)				
E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:  Part do lab. Warm				
RANGOLPH HAM at (305 ) 970 - 8442  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  Street Address: Amendment Section Division of Corporations Clifton Building				

2661 Executive Center Circle

Tallahassee, FL 32301

Tallahassee, FL 32314

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

statement of chan	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Fl nge is submitted for a corporation organized under the laws of the Sta r to change its registered office or registered agent, or both, in the Sta	ate of Fiorida
		-
2. The principal o	the corporation: SOUTH FLORIDA DECOR, INC.  office address: 13820 LAKE CLAIR COURT, P	HIAMI LAKES, FL 33014
3. The mailing ad	ddress (if different): 5AME	
4. Date of incorpo	poration/qualification: 5/22/1996 Document number:	P96000044429
5. The name and	street address of the current registered agent and registered office on tment of State: (If resigned, enter resigned)	
<u>-</u>	CORPORATION SERVICE COMPANY	
	1201 HAYS STREET	
	TALLA HASSEE, FL 32301	
6. The name and (if changed):	street address of the new registered agent (if changed) and /or registe	red office 10 SE
	Randolph HAM	OF COLOR
	13820 LAKE CLAIR COURT	CORP
	P.O. Box NOT acceptable  Miami LAKBS, FG 33014	3: 53
The street address	ss of its registered office and the street address of the business office identical.	ce of its registered agent,
_	as authorized by resolution duly adopted by its board of directors on the board, or the corporation has been notified in writing of the chan	
Signature	e of an officer or director Printed or typed na	me and title
I hereby accept t I further agree to of my duties, and document is bein corporation has	the appointment as registered agent and agree to act in this capac o comply with the provisions of all statutes relative to the proper a d I am familiar with and accept the obligation of my position as re ng filed merely to reflect a change in the registered office address, been notified in writing of this change.	ity. ind complete performance gistered agent. Or, if this I hereby confirm that the
Kand	leh Ham 1/28/2	
Sign	Nature of Registered Agent Date	<u> </u>
If signing on beh	half of an entity:	
RANdoly	Ph HMM yped 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