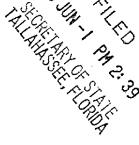
9600059014

6877 Phillips Industrial Blud

Phone #



Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1.	(Corporation Name)	(Doc	ument #)	
2	(Corporation Name)	(Doc	ument #)	
3	(Corporation Name)	(Doc	ument #)	
4	(Corporation Name)	(Doc	ument #)	
Walk in	Pick up time Will wait	Photocopy	Certified Copy Certificate of Status	

100 HA	NEW FILINGS
	Profit
	NonProfit
	Limited Liability
	Domestication
	Other

AMENDMENTS	
Amendment	
Resignation of R.A., Officer/ Director	
Change of Registered Agent	
Dissolution/Withdrawal	
Merger	

3000	02891 16/01/99	. 0138 01105007
		****35.00

OTHER FILINGS	
Annual Report	
Fictitious Name	
Name Reservation	

多地區 沙里沙 医皮骨膜 对于正常有限

REGISTRATION/ QUALIFICATION
Foreign
Limited Partnership
Reinstatement
Trademark
Other

V. SHEPARD JUN 8

1999

Examiner's Initials

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, the undersigned corporation organized under the laws of the State of Florida submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1.	The name of the corporation is:	Cover Girl, I	nc.		
2.	The mailing address of the corporation	mailing address of the corporation is : 6877 Phillips Industrial Blvd. Jacksonville, FL 32256			
3.	Date of incorporation/qualification:_	07-15-96	Document number:_P9600	0059014	
4.	The name and address of the current www. A. Gartne 1660 Pruden Jacksonville.	er tial Drive, #203	and office:	of Market Of Property of the Control	
5.	The name and address of the new reg Richard J. Le 6877 Phillips Jacksonville	ongo s Industrial Blvd.	office: (P.O. Box not acceptal	ole) Trick to	
	treet address of its registered office and ged, will be identical.	the street addre	ss of the business office of its	registered agent, as	
by the	change was authorized by resolution due board.		May 24, 199	9	
•	ture of an officer, chairman or vice chairman	of the board)	(Da	ate)	
	President	-	• •		
	(Printed or typed name and title) ag been named as registered agent and				
with	y accept the appointment as registered the provisions of all statutes relative t iar with and accept the obligation of my	o the proper an	d complete performance of n		
	12/2/		5-21-99		
	(Signature of Registered Age	nt)	(Date)		
If sig	ning on behalf of an entity:				
	Richard J. Longo	Vice Presider	t-Chief Financial Offi	cer	
	(Typed or Printed Name)		(Capacity)		
		FILING FE	£		
CR2	EO45(7/97)	· · · · · · · · · · · · · · · ·		-	

Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314