Requestor's Name Address City/State/Zip Phone # Office Use Only CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known): (Corporation Name) (Document #) (Corporation Name) (Document #) 3. (Corporation Name) (Document #) (Corporation Name) (Document #) Certified Copy Pick up time _ ☐ Walk in Photocopy Certificate of Status Mail out Will wait AMENDMENTS. NEW FILINGS Amendment Profit Resignation of R.A., Officer/Director NonProfit Change of Registered Agent Limited Liability Dissolution/Withdrawal Domestication Merger Other REGISTRATION/ OTHER FILINGS *****35.00 *****35.00 QUALIFICATION Annual Report Foreign Fictitious Name Limited Partnership Name Reservation Reinstatement Trademark Other

Examiner's Initials



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

December 7, 1999

ZYXGRAPH CORPORATION Attn: Wright @ #117 226-5 Solana Road Ponte Vedra Beach, FL 32082

SUBJECT: ZYXGRAPH CORPORATION

Ref. Number: P96000069772

This will acknowledge receipt of your correspondence which is being returned for the following reason(s):

To change the registered agent or registered office, or both, the enclosed form should be completed and returned to this office with a filing fee of \$35.

We regret that we were unable to contact you by phone. Please return the corrected document with a letter providing us with a telephone number where you can be reached during working hours.

If you have any questions concerning this matter, please either respond in writing or call (850) 487-6910.

Letter Number: 999A00057664

Louise Flemming-Jackson Corporate Specialist Supervisor

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 ofFLORIDA	T
submits the following statement in order to change its registered office or registered	a agent, or both, th the
State of Florida. 1. The name of the corporation is: ZYXGRAPH CORPORATION	
1. The name of the corporation is: ZYXGRAPH CORPORATION	· · · · · · · · · · · · · · · · · · ·
2. The mailing address of the corporation is: ATTN: WRIGHT @ #117	
226-5 SOLANA ROAD, PONTE VEDRA BEACH, FL 3208	32
3. Date of incorporation/qualification: <u>21-AUG-96</u> Document number:	P960001869772
4. The name and address of the current registered agent and office:	FIL DEC 2 AHASS
WRIGHT, C. T. 3545-1 ST. JOHNS BLUFF ROAD, SOUTH, #107	ED PED
JACKSONVILLE, FL 32224 XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	(XXXX 363 ξ3 ο
5. The name and address of the new registered agent and office: (P. O. Box Not Acc	
WRIGHT, C. T.	(same as 4. above)
ATTN: #117	
226-5 SOLANA ROAD, PONTE VEDRA BEACH, FL	32082
The street address of its registered office and the street address of the business cagent, as changed, will be identical.	office of its registered
Such change was authorized by resolution duly adopted by its board of directors authorized by the board.	s or by an officer so
CAW: 1	L-NOV-99
(Signature of an officer, chairman or vice chairman of the board)	(Date)
C. T. WRIGHT, PRESIDENT	
(Printed or typed name and title)	
Having been named as registered agent and to accept service of process for the corporation, I hereby accept the appointment as registered agent and agree to a I further agree to comply with the provisions of all statutes relative to the prope performance of my duties, and I am familiar with and accept the obligation of n registered agent.	act in this capacity. Trand complete
(Signature of Registered Agent) (Date)	
If signing on behalf of an entity:	
(Typed or Printed Name) (Capacity)

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