P97000020087

(Re	equestor's Name)	
(Ad	ddress)	
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(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL.
(Bu	ısiness Entity Nar	ne) ,
(Do	ocument Number)	:
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COVER LETTER

TO: A	mendment Section vivision of Corporations
SUBJEC	T: CUBICLE CURTAIN FACTORY, INC. Name of Corporation
DOCUM	ENT NUMBER: P9700020087
The enclo	sed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please ret	urn all correspondence concerning this matter to the following:
	ELIZABETH A. SERIO Name of Contact Person
	Name of Contact I cison
	CUBICLE CURTAIN FACTORY, INC.
	Firm/Company
	425 KANUGA DRIVE
	Address
	WEST PALM BEACH, FL 33401 City/State and Zip Code
	LIZ@CubicleCurtainFactory.com
	E-mail address: (to be used for future annual report notification)
For furthe	er information concerning this matter, please call:
	ELIZABETH A. SERIO at (561) 838-5259 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 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 Statutes, this inge is submitted for a corporation organized under the laws of the State of FLORIDA to change its registered office or registered agent, or both, in the State of Florida.
1. The name of t	the corporation: CUBICLE CURTAIN FACTORY, INC.
2. The principal	office address: 425 KANUGA DRIVE
WEST PA	LM BEACH, FL 33401
3. The mailing a	ddress (if different): SAME
4. Date of incorp	poration/qualification: MARCH 5, 1998 Document number: P97000208
	street address of the current registered agent and registered office on file with the tment of State: (If resigned, enter resigned)
	RESIGNED
	ALLAHASS
6. The name and (if changed):	street address of the new registered agent (if changed) and /or registered office
	P.O. Box NOT acceptable
	WEST PALM BEACH, FL 33401
The street addre as changed will	ss of its registered office and the street address of the business office of its registered agent, be identical.
Such change wa authorized by th	is authorized by resolution duly adopted by its board of directors or by an officer so le board, or the corporation has been notified in writing of the change.
U	ARTHUR F. SERIO / Secretary Printed or typed name and title
I hereby accept I further agree t of my duties, and document is bein corporation has	the appointment as registered agent and agree to act in this capacity. o comply with the provisions of all statutes relative to the proper and complete performance d I am familiar with and accept the obligation of my position as registered agent. Or, if this ng filed merely to reflect a change in the registered office address, I hereby confirm that the lifen notified in writing of this change.
	SEPTEMBER 18, 2009
<i>v</i> -	nature of Registered Agent Date
it signing on bel	half of an entity:
	ZABETH A. SERIO /ped or Printed Name

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (8/05)

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