## 2008 FOR PROFIT CORPORATION Mar 24, 2008 8:00 am

## **FILED**

DOCUMENT # P97000043659  1. Entity Name LIBBY'S PROSE AND VERSES, INC.					Secretary of State 03-24-2008 90076 013 ***150.00			
Principal Place of Business 32 DANGALLA COURT JACKSONVILLE, FL 32211	Mailing Address 32 DANGALLA COURT ACKSONVILLE: FL/32			HLLIN	, <b>.</b> . <b>.</b> . <b>.</b>	u <b>uu1464</b>	÷	
	We have the three state.		ne, ee a la		n tulit dini i indi i indi i indi e una ua	ING RITER CINE CINE AND AND IN	(# <b>88)</b> # (# <b>4</b> )	
2. Principal Place of Business - No P	O. Box # 3. Mailing Address	3. Mailing Address						
Suite, Apt. #, etc.	Suite, Apt. #, etc.			02082008	Chg-P	CR2E034 (12/06)		
City & State	City & State	City & State		4. FEI Number 59-3508370		<del>1</del>	oplied For ot Applicable	
Zip Country	Zip	Country	1	5. Certificate	of Status Desired	S8.75 Add Fee Require		
6. Name and Addre	ess of Current Registered Agent			7. Name and	Address of New Reg	stered Agent		
HASTY, IRENE H		' Name	- "		TAYAL, IJA			
32 DONGALLA COURT JACKSONVILLE, FL 32211		Street	Address (P.C	O. Box Numb	er is Not Acceptable).	P. J. A.		
, to 1		City .		<u></u>		Zip Cod	е	
8 The shows gamed entity submits th	nis statement for the purpose of changing its	registered office	or registered	l agast as be	ath in the State of Florid	LF.		
the obligations of registered agent		registered onice	or registered	agent, or bu	on, in the State of Florid	a. Tam ramilar win,	and accept	
SIGNATURE Signature, typed or printed name	e of registered agent and title if applicable. (NOT	E: Registered Agent sign	nature required wh	nen reinstating)	V. 6. 1. 1	DATE 12	<u>্ডি</u>	
FILE NOWIII FEE IS After May 1, 2008 Fee wi				0 May Be to Fees	9 · 1 · 1 · 1 · 1 · 1 · 1 · 1 · 1 · 1 ·			
	PFICERS AND DIRECTORS	11.	1. OF ,		/CHANGES TO OFFICE		S IN 11	
TILE P	☐ Defete	TITLE			56.5	☐ Change	☐ Addition	
NAME HASTY, IRENE H STREET ADDRESS 32 DANGALLA COL CITY-ST-ZP JACKSONVILLE, FI		STREET ADORESS CITY-ST-ZIP	5		1 34 5 77 5	***	. The	
TITLE" D	□ Delete	TITLE	-			r - ् ¹, □ Change	Addition	
NAME HASTY, THOMAS . STREET ADDRESS 32 DANGALLA COL		NAME ' STREET ADDRESS	5	•		, , , , , , , , , , , , , , , , , , , ,	٠. و	
CITY-ST-ZIP JACKSONVILLE, FI	L 32211	CITY-ST-ZIP						
TITLE NAME	☐ Delete	TITLE NAME			,	.: Change	Addition	
STREET ADORESS CITY-ST-ZIP		STREET ADDRESS CITY-ST-ZIP	5					
TITLE	☐ Delete	TITLE		<del></del>	Total County Township or Sept. Editor	☐ Change	Addition	
NAME STREET ADDRESS	A Agricia	NAME STREET ADDRESS		. 4				
CITY-SI-ZIP		CITY-ST-ZIP	ļ	<del></del>	. Visi		<u> </u>	
TITLE NAME	Li Delete	TITLE NAME			tets of the	☐ Change	☐ Addition	
STREET ADDRESS CITY-ST-ZIP	Aller States	STREET ADDRESS CITY-ST-ZIP	3 / 1/2 / 1	* *	The American Head			
TILE .	Delete	TITLE				☐ Change	Addition	
NAME STREET ADDRESS	<del>*</del> .	NAME STREET ADDRESS						
CITY-ST-ZIP	we supplied with this filling does not distill to		contained in	Chanter 11	9   Elorista Statutes   1 6	that parties that the ?	aformatia –	
12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or suppliemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment/with an address, with all other like empowered.								
SIGNATURE:	Teno OX OHIN	fy		3/2	20 12008	904-721	1-3747	
	RE AND TYPED OR PRINTED NAME OF SIGNING OFFICER	OFFICECTOR			Date	Daytime Phone II	`	

A Please Note: my street name is spelled Incorrectly.