P9700052237

Everglades Paper Inc. 1890 S. Ocean Drive #1701E Hallandale, FL 33009

CR2E031(1/95)

Office Use Only

Examiner's Initials

CORPORATION NAME(S)	& DOCUMENT	NUMBER	(S),	(if knowr	n):
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Profit	Amendment			,
NonProfit	Resignation of R.A.	, Officer/Director	-	
Limited Liability	Change of Register	ed Agent		
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OTHER FILINGS	REGISTRA QUALIFICA		-00	chd.
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Florida Department of State, Sandra B. Mortham, Secretary of State

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

STATÉMENT 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
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: EVERGLADES PAPER INC.
1. The name of the corporation is. EVERGHADES PAPER INC.
2. The mailing address of the corporation is: 1890 S. Ocean Drive #1701E
Hallandale, FL 33009
3. Date of incorporation/qualification: June 12, 1997 Document number: 497A00031770
4. The name and address of the current registered agent and office:
BILLY CHARRAN
70 Q
8205 Lake Drive #A401
Miami, FL 33166
5. The name and address of the new registered agent and office: (P. O. Box Not Acceptable)
BEULAH MEYERS
1890 S. Ocean Drive #1701E
Hallandale, FL 33009
The street address of its registered office and the street address of the business office of its registered agent, as changed, will be identical.
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board
// / /_/
(Signature of an officer, chairman or vice chairman of the board) (Date)
ROGER TEMPLETON Officer 10/24/97 (Printed or typed name and title) (Date)
Having been named as registered agent and to accept service of process for the above stated corporation, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent.
(Signature of Registered Agent) (Date)
If signing on behalf of an entity
is signing on occasi or an entity.
(Typed or Printed Name) (Capacity)