## P97000057454

(Req	uestor's Name)	
, ,		
(Add	ress)	
(Add	iress)	
(Cit	y/State/Zip/Phone	· #)
	☐ WAIT	
(Bi	usiness Entity Nar	me)
(0	ocument Number	)
Certified Copies	Certificate	es of Status
Special Instructions to	o Filing Officer:	

Office Use Only



700062742147

01/05/06--01022--001 \*\*35.00

DE JAN -5 AN 8: 38

## **COVER LETTER**

TO: Amendment Section Division of Corporations
SUBJECT: PINTS (TE GRAPHICS INC. (Name of Corporation)
DOCUMENT NUMBER: P97 0000 57454
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
MEREDITH TUPPER (Name of Contact Person)  PINTSIZE GRAPHUS, INC.  (Firm/Company)
3304 GRANADA ST. (Address)
TAMPA, R 33629 (City/State and Zip Code)
For further information concerning this matter, please call:
MEREDITH TUPIER at (813) 835. 5382  (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 chai	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this nge is submitted for a corporation organized under the laws of the State of 6.06104.  To change its registered office or registered agent, or both, in the State of Florida.	
1. The name of the	he corporation: PINTS IZE GRAPHICS, INC.	
2. The principal	office address: 3304 GRANADA ST.	_
3. The mailing ac	7)mp4 h 33629 ddress (if different): 3225 S. MACDILL AVE # 208 TMP4, FL 33629	_
4. Date of incorp	poration/qualification: 6.30.91 Document number: P97 00005 7453	7
5. The name and Florida Depart	street address of the current registered agent and registered office on file with the tment of State:	
	5 Havey F SHERMAN	
	3304 GRANADA ST.	
	79mPA, FL 33629	7
6. The name and (if changed):	street address of the new registered agent (if changed) and /or registered office	
	MEREDITH TUPPER	
	3304 GRANADA ST. 3## #	
	(P.O. Box NOT acceptable) TAMPA, R 33629	
The street addres 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	s 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.	
Wered	MPREDITH J. TUPPER  TO gif an officer of depends.  (Printed or typed name and title)	
I hereby accept of the second	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 been notified in writing of this change.	
Mao	diffigure MEREDITH J. TUPPER	
If signing on bel	half of an entity:	
(Т	yped or Printed Name)	
	* * * FILING FEE: \$35.00 * * *	

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