

FRONTSTRETCH COLLECTABLES, INC.
P.O. BOX 390639
DELTONA, FL 32739-0639

P97000072095

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. _____ (Corporation Name) _____ (Document #)
2. _____ (Corporation Name) _____ (Document #)
3. _____ (Corporation Name) _____ (Document #)
4. _____ (Corporation Name) _____ (Document #)

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DIVISION OF CORPORATIONS
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- ☐ Walk in ☐ Pick up time _____ ☐ Certified Copy
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input checked="" type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

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Examiner's Initials CC



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

October 9, 1997

FRONTSTRETCH COLLECTABLES, INC.
P.O. Box 390639
Deltona, FL 32739-0639

SUBJECT: FRONTSTRETCH COLLECTABLES, INC.
Ref. Number: P97000072095

We have received your document for FRONTSTRETCH COLLECTABLES, INC.. However, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$35.00. Your document will be retained in our pending file. Please return a copy of this letter to ensure that your check is properly credited.

If you have any questions concerning the filing of your document, please call (850) 487-6903.

Cheryl Coulliette
Document Specialist

Letter Number: 697A00049651

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 of FLORIDA 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: FRONTSTRETCH COLLECTABLES, INC.

2. The mailing address of the corporation is: P.O. Box 390639
DELTONA, FL 32739-0639

3. Date of incorporation/qualification: AUGUST 18, 1997 Document number: P97000072095

4. The name and address of the current registered agent and office:

BRIAN HOUSTON
1083 SWANSON DR.
DELTONA, FL 32738

5. The name and address of the new registered agent and office: (P. O. Box Not Acceptable)

BRIAN HOUSTON
334 E. GRAVES AVENUE SUITE 100
ORANGE CITY, FL 32763

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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.

Brian Houston
(Signature of an officer, chairman or vice chairman of the board)

10/2/97
(Date)

BRIAN HOUSTON, PRESIDENT
(Printed or typed name and title)

10/2/97
(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.

Brian Houston
(Signature of Registered Agent)

10/2/97
(Date)

If signing on behalf of an entity:

(Typed or Printed Name)

(Capacity)