LAW OFFICES OF

P970000105735

KIMPTON, BURKE, WHITE & HEIDEN, P.A.

WILLIAM J. KIMPTON ROBERT C. BURKE, JR. LANGFRED W. WHITE RICHARD T. HEIDEN FAX (813) 796-0909 EMail: kbwh@ix.netcom.com 28059 U.S. HIGHWAY 19 NORTH SUITE 100 CLEARWATER, FL 33761-2698 TELEPHONE (813) 791-0063

*****35.00 *****35.00₋

December 31, 1997

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

RE: Needle Grafix by Reeves, Inc. Our File No. 10,626.04.6.000

Gentlemen:

Enclosed is Registered Agent Certificate designating new Registered Agent for the captioned corporation. Please file the same in the records of your office.

Please date stamp the duplicate copy enclosed with the filing information and return in the self-addressed, stamped envelope also enclosed.

Further enclosed is our check in the amount of \$35 covering your filing fees.

Sincerely,

KIMPTON, BURKE, WHITE & HEIDEN, P.A.

Robert C. Burke, Jr.

RCB/cg Enclosures 98 JAN 12 JAN 9: 16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

cg:97secr01.ltr

Florida Department of State, Sandra B. Mortham, Secretary of State

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the p the undersign submits the fol both, in the Stat	rovisions of sections 607.050 ed corporation organize lowing statement in order e of Florida.	02, 617.0502, 6 ed under the r to change its r	07.1508, or 67 laws of the registered offic	State of FLORIDA ce or registered agent, or
1a. The name o	f the corporation is:NEE	DLE GRAFIX B	Y REEVES,	INC.
1b. The mailing	address of the corporation	is: <u>3123 BI</u>		
1c. Date of inco	orporation: DECEMBER 16	, 1997 Docum	nent number:	P97000105735
2. The name a	and address of the current of ROBERT C BURKE JR	•		
	28059 U S HIGHWAY	19 NORTH SUI	TE 100	- · · · · · · · · · · · · · · · · · · ·
	CLEARWATER FL 337	61		ALCR O
3. The name an	d address of the new regis			x Not According to A
	3123 BLUE HERON ST	REET	_	STA SI
	SAFETY HARBOR FL			一局市 6
registered agen	ress of its registered offic t, as changed, will be ident	icai.		
Such change was authorized to	vas authorized by resolution by the board. M. Bleves	duly adopted b	y its board of	directors or by an office
(Signature of an officer, chairman or vice chairman of the board)			(Date)	
	ES, PRESIDENT			
(Printed or	typed name and title)	•		
Having been n	amed as registered agent nerebyacceptthe appointm to comply with the provis of my duties, and I am fan	iant se ranietara.	a saentana sa	iree in actin mis canacin
Kim.	M Kleves		12/	/31/97
	of Registered Agent)			(Date)
If signing on be	half of an entity:	• •		

(Capacity)

(Typed or Printed Name)