

P98000021905

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

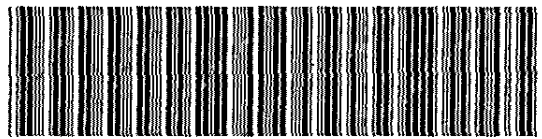
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



700040363187

08/25/04--01030--015 \*\*35.00

FILED  
04 AUG 25 PM 2:44  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

RA Address Chg.

## COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: LEAR CREATIVE SERVICES INC.  
(Name of corporation)

DOCUMENT NUMBER: 650835576

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:

JULIE ROSS MYERS  
(Name of contact person)

LEAR CREATIVE SERVICES INC.  
(Firm/Company)

9250 NE 12 AVE  
(Address)

MIAMI SHORES FLORIDA 33138  
(City/state and zip code)

For further information concerning this matter, please call:

Julie Ross Myers at (561) 251-8969  
(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  
409 E. Gaines Street  
Tallahassee, FL 32399

**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, this statement of change is submitted for a corporation organized under the laws of the State of FLORIDA in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: LEAR CREATIVE SERVICES, INC.
2. The principal office address: 9250 NE 12 AVE  
MIAMI SHORES FLORIDA 33138
3. The mailing address (if different): SAME
4. Date of incorporation/qualification: 03/02/1998 Document number: P98089021905  
630833376
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

JULIE ROSS MYERS  
11930 N BAYSHORE DR. #907  
N MIAMI FLORIDA 33181

FILED  
04 AUG 25 PM 2:44  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

SAME RA  
NEW- 9250 NE 12 AVENUE  
MIAMI SHORES FLORIDA 33138  
(P.O. Box NOT acceptable)

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, or the corporation has been notified in writing of the change.

Julie Ross Myers  
(Signature of an officer or director)

JULIE ROSS MYERS  
(Printed or typed name and title)

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. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

Julie Ross Myers  
(Signature of Registered Agent)

8-18-2004  
(Date)

If signing on behalf of an entity:

\_\_\_\_\_  
(Typed or Printed Name)

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE