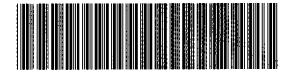
## P98000098662

(Re	questor's Name)	
(Add	dress)	
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(Cit	y/State/Zip/Phone	<del>e</del> #)
PICK-UP	WAIT	MAIL
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(Do	cument Number)	
Certified Copies	Certificates	s of Status
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## **COVER LETTER**

TO: Amendment Section Division of Corporations		
SUBJECT: American Textile, Inc. Name of Corporation		
DOCUMENT NUMBER: <u>P98000098662</u>		
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:		
Steve Shapiro		
Name of Contact Person		
American Textile, Inc.		
Firm/Company		
1038 N.W. 21 Terrace		
Address		
Miami, Florida 33127		
City/State and Zip Code		
rags@troyindustries.com		
E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call:		
Steve Shapiro at (305- )796-3359  Name of Contact Person Area Code & Daytime Telephone Number		
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 cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this inge is submitted for a corporation organized under the laws of the State of $\underline{\mathtt{Florida}}$ er to change its registered office or registered agent, or both, in the State of Florida.
1. The name of	the corporation: American Textile, Inc.
2. The principal	office address: 1038 N.W. 21 Ter.
Mi	ami, Florida 33127
3. The mailing a	address (if different):
4. Date of incor	poration/qualification: 11/24/1998 Document number: P980000928
	d street address of the current registered agent and registered office on file with the rtment of State: (If resigned, enter resigned)
resigned)	Steven Shapiro 1038 NW 21 Terr., Migmi, FL 33127
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered office
	Benjamin Shapiro 670 Cardinal Street Plantation, Fl. 33324
	P.O. Box NOT acceptable
as changed will	1038 N.W. 21 Ter. Midmi, ri. 3312/
Such change was authorized by the	as authorized by resolution duly adopted by its board of directors or by an officer so he board, or the corporation has been notified in writing of the change.
x Ser	Benjamin Shapiro President Printed or typed name and title
I further agree i of my duties, an	the appointment as registered agent and agree to act in this capacity.  to comply with the provisions of all statutes relative to the proper and complete performance  and I am familiar with and accept the obligation of my position as registered agent. Or, if this  and filed merely to reflect a change in the registered office address, I hereby confirm that the  been notified in writing of this change.
Den	MW June 18, 2011  Date  Date
If signing on be	half of an entity:
	Shapiro yped or Printed Name

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