TRANSMITTAL LETTER

## P99000048793

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL<sup>-</sup> 32314

**500003018806--**8 -10/19/99--01007--022 \*\*\*\*\*35 00 \*\*\*\*\*\*

SUBJECT:	Beanies	Galore	INC
	(Pro	posed corporate namé -	must include suffix)

Enclosed is an original and one(1) copy of the articles of incorporation and a check for :

□ \$70.00 Filing Fee	□ \$78.75 Filing Fee & Certificate of Status	□\$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED	
FROM:	) NicHolas F			- -
	101 0 / m n //	Printed or typed)	LLANA	40 DO

07-493-1910

Daytime Telephone numbe

or 24 cm,0"

NOTE: Please provide the original and one copy of the articles.



## FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

October 4, 1999

NICHOLAS FANTOZZI 101 OLYMPUS DRIVE OCOEE, FL 34761

SUBJECT: BEANIES GALORE, INC.

Ref. Number: P99000048793

This will acknowledge receipt of your correspondence which is being returned for the following reason(s):

Please sign and return your check along with this document in order to complete your filing.

If you have any questions concerning the filing of your document, please call (850) 487-6916.

Letter Number: 699A00048050

Carol Mustain Corporate Specialist

99 OCT 15 AM 10: 39

## 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
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: LOCANICS GATORE, THE
2000 BODALIPE GALARE TALE
2. The mailing address of the corporation is: <u>SCANICS GAIORE TNC</u>
101 Olympus Un. Ococe, Fl. 34761
3. Date of incorporation/qualification: MAY 28, 1999 Document number: P990000 487
4. The name and address of the current registered agent and office:
MARANTAA CLANK
7376 DoilecoTe Drive
ORIANDO F1. 32810
5. The name and address of the new registered agent and office: (P. O. Box Not Acceptable)
NICHOLAS FANTOZZI
101 Olympus Duve
Ococe, Fl. 34761
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.
9/19/99
(Signature of an officer, chairman or vice chairman of the board) (Pate)
NICHOLAS FANTOZZI CHAMANAN
(Printed or typed name and title)
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 Lam familiar with and accept the obligation of my position as
registered agent.
-//4 <del>40</del>
(Signature of Registered Agent) (Vate)
If signing on behalf of an entity:
(Typed or Printed Name) (Caracity)
(Lyped of Finned Name) (Capacity)

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