P99000070197

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T. LEWIS

COVER LETTER

- TO: Amendment Section Division of Corporations

SUBJECT: E. J. BOOKOUT DESIGNS, INC.

Name of Corporation

DOCUMENT NUMBER. P99000070197

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:

PAULA TURNER

Name of Contact Person

E. J. BOOKOUT DESIGNS, INC.

Firm/Company

P.O. BOX 15065

Address

SARASOTA, FL 34277

City/State and Zip Code

P.TURNER1@ATT.NET

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

PAULA TURNER

,941 \350-6771

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	ange is submitted for a corporation	n organized under the laws of the State of FLORIDA registered agent, or both, in the State of Florida.	
I. The name of	the corporation: E. J. BOOKO	OUT DESIGNS, INC.	
2. The principal	office address: 4436 HICKS	ST., SARASOTA, FL 34233	
3. The mailing a	address (if different): P.O. BOX	(15065, SARASOTA, FL 34277	
4. Date of incor	poration/qualification: 8-9-	7/999 Document number: P99000070197	
	d street address of the current registrement of State: (If resigned, enter	stered agent and registered office on file with the resigned)	
	EDGAR J. BOOKOUT		
	8126 BLAIKIE COURT	TALL SECO	erg:
	SARASOTA, FL 34240	SECRETARY TALLAHASS	£
6. The name and (if changed):	d street address of the new register	red agent (if changed) and /or registered office	ות כ
	4436 HICKS ST.		
	SARASOTA, FL 34233		
	P.O. 1	Box NOT acceptable	
		street address of the business office of its registered agent,	
Such change wa authorized by th	as authorized by resolution duly a ne board, or the corporation has b	dopted by its board of directors or by an officer so een notified in writing of the change.	
<u>Ceala</u>	Juster or director	PAULA TURNER, VP	
I hereby accept I further agree performance of agent. Or, if th hereby confirm	the appointment as registered as to comply with the provisions of a my duties, and I am familiar with is document is being filed merely that the gorporation has been no	ent and agree to act in this capacity. all statutes relative to the proper and complete and accept the obligation of my position as registered to reflect a change in the registered office address, I tified in writing of this change.	
Edar!	west		
,	nature of Registered Agent chalf of an entity:	Late	
EDGAR J.	•		
	yped or Printed Name		

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (03/12)

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