568641

(Requestor's Name)		
(Address)		
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,		
(City/State/Zip/Phone #)		
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(Business Entity Name)		
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COVER LETTER

TO:	Amendment Section Division of Corporations	
SUBJI	ECT: <u>Do All Signs and Printing Co</u> (Name of Co	Inc. prporation)
DOCU	MENT NUMBER: S68641	
The en	closed Statement of Change of Registered Office.	Agent and fee are submitted for filing.
Please	return all correspondence concerning this matter	to the following:
	Robert (Name of Con	C. Furr, TRUSTEE tact Person)
	Furr & C	ohen, PA mpany)
	2255 Glades Ro (Addre	oad, Suite 337W
	Boca Rato	on, FL 33431 d Zip Code)
For fur	ther information concerning this matter, please ca	all:
	Marc P. Barmat, Esq. (Name of Contact Person)	at (561) 395-6550 (Area Code & Daytime Telephone Number)
Enclos	ed is a \$35.00 check made payable to the Departm	nent 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 Florida rockange its registered office or registered agent, or both, in the State of Florida.	
1. The name of t	the corporation: Do All Signs and Printing Co., Inc.	
2. The principal	office address: 3801 N University Drive, Suite 101, Sunrise, FL 33351	
3. The mailing a	ddress (if different):	
4. Date of incorp	poration/qualification: 7/25/91 Document number: S68641	
	I street address of the current registered agent and registered office on file with the trnent of State: (If resigned, enter resigned)	
	Phillip B. Booth	
	3801 N University Drive, Suite 101, Sunrise, FL 33351	
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):		
	Robert C. Furr	
	Furr & Cohen, PA (P.O Box NOT acceptable)	
	2255 Glades Road, Suite 337W, Boca Raton, FL 33431	
The street addre	ss of its registered office and the street address of the business office of its registered agent, be identical.	
Such change wa authorized by th	as authorized by resolution duly adopted by its board of directors or by an officer so the board, or the corporation has been notified in writing of the change.	
	Phillip B. Booth (Printed or typed name and title)	
I hereby accept I further agree t of my duties, an document is bei corporation has	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 of all am familiar with and accept the obligation of my position as registered agent. Or, if this ng filed merely to reflect a change in the registered office address, I hereby confirm that the been notified in writing of this change.	
(Sig	minure of Registered Agent) 5/2/O (Date)	
If signing on be	half of an entity:	
Ť)	Robert C. Furr, TAUSTEE Syped or Printed Name)	

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