

FO/0000004083

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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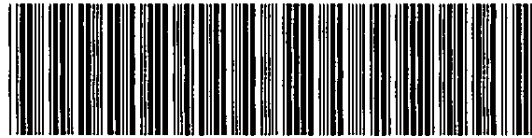
(Business Entity Name)

(Document Number)

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**FILED**  
12 MAY 21 PM 3:20  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

MAY 24 2012  
T. ROBERTS

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** DeGraw Street Productions, Inc.  
Name of Corporation

**DOCUMENT NUMBER:** F01000004083

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:

IRVING KAUFMAN  
Name of Contact Person

IRVING KAUFMAN ACCOUNTANCY CORPORATION  
Firm/Company

13245 RIVERSIDE DR STE 320  
Address

SHERMAN OAKS, CA 91423  
City/State and Zip Code

IKAC@SBCGLOBAL.NET  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

IRVING KAUFMAN at 818-380-0088  
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**

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 California in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: DeGraw Street Productions, Inc.
2. The principal office address: 13245 Riverside Drive Suite 320, Sherman Oaks, CA 91423 US
3. The mailing address (if different): 13245 RIVERSIDE DR, 320, SHERMAN OAKS CA 91423
4. Date of incorporation/qualification: 9-2-01 Document number: F01000004083
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

C T CORPORATION SYSTEM

1200 South Pine Island Road

Plantation, FL 33324

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

InCorp Services, Inc.

17888 67th Court North


P.O. Box NOT acceptable

Loxahatchee, FL 33470

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**TALLAHASSEE FLORIDA**

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.

  
Signature of an officer or director

IRVING KAUFMAN, SECRETARY-TREASURER  
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.

  
Signature of Registered Agent

May 4, 2012  
Date

If signing on behalf of an entity:

Josie A Sorensen on behalf of InCorp Services, Inc.  
Typed or Printed Name

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE  
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314