M030000043360

(Requestor's Name) (Address) 300037516483 (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL MJH (Business Entity Name) 06/03/04--01027--006 **25.00 (Document Number) Certified Copies _____ Certificates of Status Special Instructions to Filing Officer: 7/8 P/A Change * Maica Prinade change

Office Use Only

May <u>25</u>, 2004

Division of Corporations P. O. Box 6327 Tallahassee, Florida 32314

Re:

SSGP Holdings, LLC

Document Number: M03000004336

Dear Sir or Madam:

Enclosed for filing is a Statement of Change of Registered Office or Registered Agent to change the registered address for the above-referenced limited liability company, together with a check for \$25.00 payable to the Florida Department of State for the filing fee.

In addition, please <u>change the principal address and the mailing address</u> of the company on your records as follows:

Current Principal Address and

639 E. Ocean Avenue

Street Address:

Boynton Beach, FL 33435

New Principal Address and

841 Prudential Drive, Suite 150

Street Address

Jacksonville, FL 32207

KDD Holdings, LLC, Member

Bv:

Harold Dodt, as its Manager



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

June 7, 2004

HAROLD DODT 841 PRUDENTIAL DRIVE, SUITE 150 JACKSONVILLE, FL 32207

SUBJECT: SSGP HOLDINGS, LLC Ref. Number: M03000004336

We have received your document for SSGP HOLDINGS, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6967.

Letter Number: 804A00038661

Michelle Hodges Document Specialist

Division of Cornerations - P.O. ROY 6327 Tallahasson, Florida 32314

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

3,,,	,		- -
1. The name of the limite	d liability company is:	SSGP HOLDINGS, LLC	,
2. The mailing address of	the limited liability cor	mpany is: 639 E. OCEAN AVE	NUE
BOYNTON BEACH FL			
12/29/2003	-	M0300004336	्राच्या चार्या । स्टब्स
3. Date of filing/registration in Florida 4. Documen		4. Document number	
5. The name of the register Florida Department of S	red agent and the regist State: JEFFREY R. DOUG	ered office address as shown on th	e records of the
	32/1/KE1/1/. DOOC	Name	~ Q
	639 E. OCEAN AVE		-
		Address	
	BOYNTON BEACH	State and Zip	The state of the s
6. The name and address of the new registered agent and/or office:			# :
	JEFFREY R. DOUG	BLAS	<u> </u>
	841 PRUDENTIAL	Vame DRIVE, SUITE 150	·
	Florida street address	(P.O. Box NOT acceptable)	•
	JACKSONVILLE	FL 32207	
	City, S	tate and Zip	Ī
confirmed that after the cl and the business office of	nange or changes are marked the registered agent will reby confirmed that the diability company or a f the limited liability confirmed that the limited liability confirmed the liabil		ie registered office Florida limited
HAROLD DODT			<u></u>
(Printed or typed name of signee)			<u>**</u> -
I hereby accept the appoint comply with the provision and I am familiar with an Chapter 608, F.S. Or, if the address, I hereby confirm (Signature of Registered Agent)	intment as registered as sofall statules relative d accept the obligation his decument is being f that the limited liability	gent and agree to act in this capaci to the proper and complete perfor s of my position as registered agen iled to merely reflect a change in t y company has been notified in wr	ty. I further agree to mance of my duties, t as provided for in he registered office iting of this change.
Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314			

FILING FEE: \$25.00

INHS18(10/99)