295027

TRANSMITTAL LETTER

					1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
SUBJECT:	VICTORIUM COR	RPORATION e of corporation			3 PH 3: 75
	(1 taile	e or corporation	•)		ري جي آ
DOCUMENT NUM	BER: 295027		=	- 	137
The enclosed Stateme	nt of Change of Registered	d Office/Agen	t and fee are subm	itted for filing.	_
Please return all corre	spondence concerning this	s matter to the	following:		
	rd, Jr., Esquire (Name of person) caham French, P.A.				
- ONG	me of firm/company)				
P. O. Box	• • • •		500	0007473 -09/03/020 *****35.00	1049014
(Ci	FL 32721-0048 ty/state and zip code) on concerning this matter, p	please call:			-
F. A. For		386 _{-)} .	734-3451 c daytime telephone	number)	

Mailing Address: Same Amendment Section

Enclosed is a \$35.00 check made payable to the Department of State.

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

TO:

Amendment Section Division of Corporations

Street Address:
Amendment Section
Division of Corporations

Division of Corporation 409 E. Gaines Street Tallahassee, FL 32399

QA Chq.

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

	ns 607.0302, 617.0302, 607.1308, or 617 for a corporation organized under the laws	•	ıtes,			
	unge its registered office or registered agei	•	State			
of Florida.		•	2/252			
1. The name of the corporation:	VICTORIUM CORPORATION		<u> </u>			
2. The principal office address:	1425 Blackwelder Road		A 2000			
	DeLeon Springs, FL 32130	USA	<u>)</u>			
3. The mailing address (if different):_	P. O. Box 1136	_	3			
	DeLeon Springs, FL 32130-1136_	USA				
4. Date of incorporation/qualification	: <u>07/20/1965</u> Document numbe	er: <u>295027</u>				
5. The name and street address of the Florida Department of State:	current registered agent and registered offic	e on file with the				
	1405 Blackwelder Road	· ·				
	DeLeon Springs, FL 32130					
6. The name and street address of the changed):	ne new registered agent (if changed) and /	or registered office	e (if			
- 11/1/	Michael Jerome Cook		* *			
1425 Blackwelder Road (P.O. Box or personal mailbox NOT acceptable)						
	Leon Springs, Florida					
	fice and the street address of the business of	office of its register	red			
Such change was authorized by resol authorized by the board, or the corpo	ution duly adopted by its board of directors ration has been notified in writing of the cl	s or by an officer so hange.	0			
(Signature of an officer, chairman or vice chairman of	,					
I hereby accept the appointment as r. I further agree to comply with the properties, and I am fregistered agent. Or, if this document office address I hereby confirm that (Signature of Registered Agent)	egistered agent and agree to act in this cap ovisions of all statutes relative to the prope amiliar with and accept the obligation of n it is being filed merely to reflect a change in the corporation has been notified in writin	pacity. Fr and complete ny position as in the registered g of this change.	4-			
If signing on behalf of an entity:	/ (Date)					
			$\sigma_{t} = T_{t} \Delta_{t}$			
(Typed or Printed Name)	(Capacity)					

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