## 541627

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## TRANSMITTAL LETTER

Division of Corporations	
SUBJECT: South Florida Eavipment	t Co.
( · · · · · · · · · · · · · · · · · · ·	
DOCUMENT NUMBER: 541627	
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:	
Patrick North, Esa, (Name of person)	presspecial and a second a second and a second a second and a second a second and a
Woodard & North LLC (Name of firm/company)	
(Name of firm/company)	
9350 5 DIXIE Hwy #1540	
Miami FL 33156 (City/state and zip code)	
For further information concerning this matter, please call:	
Patrick North at 305 6.  (Name of person) (Area code & day	70-3150
(Name of person) (Area code & day	time telephone number)
Enclosed is a \$35.00 check made payable to the Department of State.	
Mailing Address: Amendment Section Street Address Amendment Section	i. ction
Division of Corporations  Division of Corporations  P.O. Box 6327  Division of Corporations  409 E. Gaines S	porations
Tallahassee, FL 32314 Tallahassee, FL	32399

## 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 <b>Florida</b> in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: South Florida Equipment Co.  2. The principal office address: 10775 SW 188th St. Bay #5
Hrami, FL 33157
3. The mailing address (if different):
4. Date of incorporation/qualification: 1977 Document number: 541627
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
Gerspacher, Thomas S.
Gerspacher, Thomas S.  4417 San Amaro Dr. 25
Coral Gables PR 33146
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):  Potrick B. North, ESD.  9350 S. Dikie Hwy #1540  (P.O. Box or personal mullbox NOT acceptable)  Highi, FL 33156
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.    Datrick B. North (Printed or typed name and trile)
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 and 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]  (Signature of Registered Agent)
If signing on behalf of an entity:  (Typed or Printed Name) (Canacity)

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