665410

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COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: S&S Craftsmen, Inc.

Name of Corporation

DOCUMENT NUMBER, 665410

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:

Jeannie Harrington

Name of Contact Person

S&S Craftsmen, Inc.

Firm/Company

P.O. Box 76071

Address

Tampa, FL 33675-1071

City/State and Zip Code

jeannie@s-scraftsmen.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jeannie Harrington

., 813

247-4429

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 - 12 / 12

Tallahassee, FL 32314,

Street Address:

Amendment Section

Division of Corporations

Clifton Building ...

12661 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 Florida in order to change its registered office or registered agent, or both, in the State of Florida.	
1. The name of the corporation: S&S Craftsmen, Inc.	
2. The principal office address: 6404 East Columbus Dr. Tampa, FL 33619	
3. The mailing address (if different): P.O. Box 76071 Tampa, FL 33675-1071	
4. Date of incorporation/qualification: 04/01/1980 Document number: 665410	
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)	
Thomas M Steinglein	
1307 E 2nd Avenue	
Tampa, FL 33605	
Tampa, FL 33605 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):	j
John L Rosende	
6404 East Columbus Dr.	
P.O. Box NOT acceptable	
Tampa, FL 33619	
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 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, I 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 If signing on behalf of an entity:	
Typed or Printed Name	

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