Country Coun	Entity Nam	MENT # F000000 SS ADVISORY SERVICES, INC.					Jan 08, Secret	FILE 200 tary	1 8:	00 an tate	
Suite, Apl. #, etc. Suite, Apl. #, etc. Soute S) POWERL	INE RD., SUITE 309	21301 POWERLINE RD., SU	JITE 309							
Applied For Not Applied Fo	· 1										
Not Applicable Not							4. FEI Number 52-0979328 Applied For				
RASSENSTEIN, J.D. 21301 POWERLINE RD, STE 309 BOCA RATON FL 33433 City FL Zip Code	Zip	Country	Zip	Coun	ntry	5.			8.75 Add	litional	
RRASSENSTEIN, J.D. 21301 POWERLINE RD, STE 309 BOCA RATON FL 33433 City FL Zip Code		6. Name and Address of Current Re	gistered Agent	<u> </u>	I	7. 1		gistered Ag	ent		
### Addition POWERLINE RD, STE 309 ### BOCA RATON FL 33433 City FL Zip Code		Strand Cara Law Transcott	THE STATE OF THE S	÷ ξ	-Name -		The same with	مدر متسمد في	.e-1 -e-1 -	* *	
The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. NATURE Figure Figure	2130		Street Address (P.O. Box Number is Not Acceptable)								
The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. NATURE Signature, hood or printed name of inglitered agent and tide if approache. (IOTE, Pregnaned Agent signature required who reinstating) DATE	500	BOOK INTON IE CONCO			City		□ Zip Code				
This corporation is eligible to satisfy its intangible flas filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Added to Fees Make Check Payable to Department of State CPT		<u> </u>				<u> </u>					
TRADRESS ST-ZIP CPT KRASSENSTEIN, J.D. STREET ADDRESS ST-ZIP Delete KRASSENSTEIN, JONATHAN T STADDRESS ST-ZIP ST-ZIP STADDRESS ST-ZIP Delete TITLE NAME STREET ADDRESS ST-ZIP Delete TITLE NAME STREET ADDRESS ST-ZIP Delete STREET ADDRESS ST-ZIP TITLE NAME STREET ADDRESS ST-ZIP Delete TITLE NAME STREET ADDRESS STREET ADDRESS ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS ST-ZIP Delete TITLE NAME STREET ADDRESS STREET	Tax filing r	equirement and elects to do so. ia on back)	After MAY 1, 20 Make Check Payat	001 Fee ble to Do	will be \$550.0	State	Trust Fund Contribution.		Ádded	to Fees	
KRASSENSTEIN, JONATHAN T 918 DALE AVE. STRET ADDRESS ST-ZIP D KRASSENSTEIN, DANIEL M KRASSENSTEIN, VELMA C STRET ADDRESS ST-ZIP D KRASSENSTEIN, VELMA C STRET ADDRESS ST-ZIP KRASSENSTEIN, VELMA C STRET ADDRESS ST-ZIP BOCA RATON FL 33431 CITY-ST-ZIP KRASSENSTEIN, JULIET S KRASSENSTEIN, JULIET S KRASSENSTEIN, JULIET SIRET ADDRESS ST-ZIP NAME STRET ADDRESS ST-ZIP D Change Addition Addition NAME STRET ADDRESS ST-ZIP CITY-ST-ZIP D Change Addition NAME STRET ADDRESS ST-ZIP CITY-ST-ZIP D Change Addition NAME STRET ADDRESS ST-ZIP CITY-ST-ZIP CHANGES ST-ZIP GLADWYNE PA 19035	1			_	· - T	AE	DITIONS/CHANGES TO OFFIC				
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BRADFORD WOODS PA 15015 Delete TITLE Change Addition	-ST-ZiP	s Krassenstein, juliet	☐ Delete	TITL!	E E			Į.	Change	☐ Addition	
TADDRESS ST-ZIP GLADWYNE PA 19035 I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the reference or a required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attact meeting that I am an officer or director of the corporation or the reference of the corporation of the corporation or the reference of the corporation of the corporation of the corporation of the corporation or the reference of the corporation of the cor	ST-ZIP	BRADFORD WOODS PA 15015 D	☐ Delete	CITY	-ST-ZIP			[Change	☐ Addition	
indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the repeiper of dustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attacking of the same legal effect as if made under oath; that I am an officer or director of the corporation of the same legal effect as if made under oath; that I am an officer or director of the corporation of the same legal effect as if made under oath; that I am an officer or director of the corporation of the same legal effect as if made under oath; that I am an officer or director of the corporation of the same legal effect as if made under oath; that I am an officer or director of the corporation of the same legal effect as if made under oath; that I am an officer or director of the corporation of the same legal effect as if made under oath; that I am an officer of the same legal effect as if made under oath; that I am an officer of the same legal effect as if made under oath; that I am an officer of the same legal effect as if made under oath; that I am an officer of the same legal effect as if made under oath; that I am an officer of the same legal effect as if made under oath; that I am an officer oath; that I am an oath oath oath oath oath oath oath oath	E ET ADDRESS - ST-ZIP	1611 SWEETBRIAR RD. GLADWYNE PA 19035	is filing does not qualify for	STRE City	ET ADDRESS -ST-ZIP	Section	119.07(3)(i). Florida Statutes 1 f	urther certifi	v that the in	iformation	
	indicated -	on this report or supplemental report is tri	ue and accurate and that r	my signai ∶as requi	ture shall have t red by Chapter	ne same 607, Flori	legal effect as if made under oa	ath; that I am appears in I	an officer Block 11 or	or director Block 12 if	