F080000002889

(Requestor's Name)
(Address)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Eddinoss Entity Harro)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
·
,

Office Use Only



600184091716

Change as

· 08/09/10--01043--022 **35.00

FILED PH 14.05
SECRETARY OF STATE
SECRETARY OF STATE

100

COVER LETTER

TO:	Amendment Section Division of Corporations				
SUBJ	JECT: SURVIVAL SYSTEMS INTERN Name of Corporation				
DOC	UMENT NUMBER: F0800000	2889			
The er	nclosed Statement of Change of Registered Office/Agent	and fee are submitted for filing.			
Please	e return all correspondence concerning this matter to the f	ollowing:			
CLAUDIO ZAVALA Name of Contact Person					
	SURVIVAL SYSTEMS INTERI	NATIONAL INC			
SURVIVAL SYSTEMS INTERNATIONAL, INC. Firm/Company					
	931 INDUSTRY R	OAD			
Address					
KENNER LA 70062 City/State and Zip Code					
	·				
karent@ssinola.com E-mail address: (to be used for future annual report notification)					
For fu	urther information concerning this matter, please call:				
	Karen Theriot, Office Mgr at (504 469-4545 rea Code & Daytime Telephone Number			
	Name of Contact Person A	rea Code & Daytime Telephone Number			
Enclos	sed is a \$35.00 check made payable to the Department of	State.			
	Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle			

Tallahassee, FL 32301

TO: An

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this angelis submitted for a corporation organized under the laws of the State of California er to change its registered office or registered agent, or both, in the State of Florida.	
	the corporation: Survival Systems International, Inc. office address: 10540 North West 26th Street Suite G-301 Miami FL 33172	
3. The mailing a	address (if different):	_
4. Date of incorp	poration/qualification: 6-26-2008 Document number: F08000002889	_
	d street address of the current registered agent and registered office on file with the rtment of State: (If resigned, enter resigned)	
	CLAUDIO ZAVALA	
	3093 East Commercial Blvd #1	
	Ft. Lauderdale, LA 33308	_
6. The name and (if changed):	Ft. Lauderdale, LA 33308 d street address of the new registered agent (if changed) and /or registered office CARTARY office change:	
	office change:	1
	10540 North West 26th St. Suite-G 301 Miami FL 33172 PO. Box NOT acceptable	_
The street address changed will	ess of its registered office and the street address of the business office of its registered agent, be identical.	
Such change via authorized by the	as authorized by resolution duly adopted by its board of directors or by an officer so he board, or the corporation has been notified in writing of the change.	
	CLAUDIO ZAVALA Printed or typed name and title	
I hereby accept I further agree of my duties, an document is bei	the appointment as registered agent and agree to act in this capacity. to comply with the provisions of all statutes relative to the proper and complete performance to Lam familiar with and accept the obligation of my position as registered agent. Or, if this ing filed merely to reflect a change in the registered office address, I hereby confirm that the s been notified in writing of this change.	
(-4)	8-2-2010	
If signing on be	ehalf of an entity:	
Т	Typed or Printed Name	

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