Page 1 of 2

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (850)222-1092

Fax Number : (850)878-5368

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: Soc attache

2009 NOY 25 AM 8: 00 SECRETARY OF STATE ALL AHASSEE, FLORIDE

## REGISTERED AGENT CHANGE WHEELED COACH INDUSTRIES, INC.

Certificate of Status	0
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

15 25060 (1)

## **COVER LETTER**

TO: Amendment Section Division of Corporations
SUBJECT: Wheeled Coach Industries, INC. Name of Corporation
DOCUMENT NUMBER: G42895
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:
Name of Contact Person
Wheeled Coach Firm/Company
2737 N Forsyth Rd.
Winter Pork FL. 32792 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Contact Person at (407 ) 677-7777  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 Tallahassee, FL 32314 Street Address: Amendment Section

Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

CR26045 (8/05)

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

	of the corporation: Wheeled	Couch Industries,	Inc.	•
	oal office address: 2737 N Fo			
3. The mailin	g address (if different):			
4. Date of inc	orporation/qualification:	6/8/1983	Document number:	G42895
5. The name	and street address of the curr partment of State: (If resigne	ent registered ag	ent and registered office on file with the	he
- 141,-4	COLLINS, ROBERT	ray anima resignisa	•	
	2737 N. FORSYTH RD			
	WINTER PARK FL 3279	2 US		
6. The name (if change:		registered agent	t (if changed) and /or registered office	
	c/o C T Corporation Syste	rn, 1200 South P	ine Island Road	
	,	P.O. Box NOT	acceptable	
	Plantation, Florida 33324			
The street ad as changed v	dress of its registered office vill be identical.	and the street a	address of the business office of its re	gistered
Such change authorized by	was authorized by resolution the board, or the corporati	on duly adopted on has been not	by its board of directors or by an off ified in writing of the change.	icer so
Ron	So Londer or duector		RON SOTENSON V. F. Ri	
I hereby acci I further agre of my duties,	pt the appointment as regis te to comply with the provis and I am familiar with and being filed merely to reflect as been notified in writing	stered agent and tions of all statu accept the obli- a change in the of this change.	l agree to act in this capacity, tes relative to the proper and comple gation of my position as registered as registered office address, I hereby c	ete perfor geht. Or, onfirm th
document is corporation	T Companylon President - 4	ሃL છે. <i>በህ</i>	dree 11/24/2009	
document is corporation By:	T Corporation System		11 1- 11 0-11	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (8/05)