

CT CORPORATION

J09626

CORPORATION(S) NAME

Southern Coach, Inc.

FILED
2002 JUL -2 PM 1:46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

<input type="checkbox"/> Profit	<input type="checkbox"/> Amendment	<input type="checkbox"/> Merger
<input type="checkbox"/> Nonprofit		
<input type="checkbox"/> Foreign	<input type="checkbox"/> Dissolution/Withdrawal	<input type="checkbox"/> Mark
	<input type="checkbox"/> Reinstatement	
<input type="checkbox"/> Limited Partnership	<input type="checkbox"/> Annual Report	<input type="checkbox"/> Other
<input type="checkbox"/> LLC	<input type="checkbox"/> Name Registration	<input checked="" type="checkbox"/> Change of RA
	<input type="checkbox"/> Fictitious Name	<input type="checkbox"/> UCC
<input type="checkbox"/> Certified Copy	<input type="checkbox"/> Photocopies	<input type="checkbox"/> CUS
<input type="checkbox"/> Call When Ready	<input type="checkbox"/> Call If Problem	<input type="checkbox"/> After 4:30
<input checked="" type="checkbox"/> Walk In	<input type="checkbox"/> Will Wait	<input checked="" type="checkbox"/> Pick Up
<input type="checkbox"/> Mail Out		

Name _____
Availability _____
Document _____
Examiner _____
Updater _____
Verifier _____
W.P. Verifier _____

7/1/02

Order#: 5453440

600006137316--7
-07/02/02--01002--010
*****35.00 *****35.00

Ref#: _____

Amount: \$ _____

660 East Jefferson Street
Tallahassee, FL 32301
Tel. 850 222 1092
Fax 850 222 7615

C. Coulllette JUL 02 2002



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

July 2, 2002

C T CORPORATION

TALLAHASSEE, FL

SUBJECT: SOUTHERN COACH, INC.
Ref. Number: J09626

RECEIVED
02 JUL -2 PM 12:12
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

We have received your document for SOUTHERN COACH, INC. and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6903.

Cheryl Coulliette
Document Specialist

Letter Number: 502A00041754

Please back-date

Kuh
JS

**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,
the undersigned corporation organized under the laws of the State of Florida
submits the following statement in order to change its registered office or registered agent, or both, in
the State of Florida.

1. The name of the corporation : Southern Coach, Inc.

2. The mailing address of the corporation : 1985 N.W. 57 Street, Ocala, FL 34475

3. Date of incorporation/qualification: 04/17/1986 Document number: J09626

4. The name and address of the current registered agent and office:

Stephenson, Paul

1985 NW 57th Street

Ocala, FL 34475

5. The name and address of the new registered agent (if changed) and/or registered office (if changed):
(P. O. Box Not Acceptable)

C T Corporation System

c/o C T Corporation System, 1200 South Pine Island Road,

Plantation, Florida 33324

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.

(Signature of an officer, chairman or vice chairman of the board)

6/10/02
(Date)

J. C. EDWARDSSEN, SECRETARY

(Printed or typed name and title)

Having been named as registered agent and to accept service of process for the above stated
corporation, 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.

C T Corporation System

By: (Signature of Registered Agent)

(Signature of Registered Agent)

(Date)

Kathleen C. Gariepy

If signing on behalf of an entity:

CT Corporation System

Asst. Sec.

(Typed or Printed Name)

(Capacity)

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

CR2E045(9/00)

DIVISION OF CORPORATIONS

P.O. BOX 6327

TALLAHASSEE, FL 32314