## 162057

(Requestor's Name)  (Address)	800135103028
(Address)	
(City/State/Zip/Phone #)	08/29/0801016006 **35.00
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status  Special Instructions to Filing Officer:	2000 AUG 29 PM II: 39 SECRE TARY OF STATE TALLAHASSEE, FLORIDA

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## **COVER LETTER**

TO:	: Amendment Section Division of Corporations	
SUBJ	BJECT: SUREWAY ENTERPRISES INC.	
	(Name of Corpo	ration)
DOC	CUMENT NUMBER: L62057	
The e	enclosed Statement of Change of Registered Office/Ag	ent and fee are submitted for filing.
Please	ase return all correspondence concerning this matter to the	ne following:
	TIM WOODMAN	
	(Name of Contact	Person)
	SUREWAY ENTERPRISES INC.	
	(Firm/Compa	ny)
	3004 51ST STREET EAST	
	(Address)	
	BRADENTON,FLORIDA 34208	
	(City/State and Zi	p Code)
For fi	further information concerning this matter, please call:	
TIM	/ WOODMAN at	(941 ) 745-1403 (Area Code & Daytime Telephone Number)
	(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclo	closed is a \$35.00 check made payable to the Department	t of State.
	Mailing Address: Amendment Section	Street Address: Amendment Section
	Division of Corporations	Division of Corporations
	P.O. Box 6327	Clifton Building
	Tallahassee, FL 32314	2661 Executive Center Circle
		Tallahassee, FL 32301

TO:

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

statement of cha	nge is submitted for a corporation organiz	607.1508, or 617.1508, Florida Statutes, this ed under the laws of the State of FLORIDA	
	r to change its registered office or register	·	
	he corporation: SUREWAY ENTERPRISE		
	office address: 3004 51ST STREET EAST	•	
BRADENTO	N,FLORIDA 34208		
3. The mailing a	ddress (if different): SAME AS ABOVE	· · · · · · · · · · · · · · · · · · ·	
4. Date of incorp	oration/qualification: 1990	Document number: L62057	
	street address of the current registered age tment of State:	· ·	
	JACK WINDT	7.0	
	2389 RINGLING BLVD. SUITE-A	ALLLARE SECRET	
	SARASOTA,FLORIDA 34237	TARY ASS	
JACK WINDT  2389 RINGLING BLVD. SUITE-A  SARASOTA, FLORIDA 34237  6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):  TIM WOODMAN			
TIM WOODMAN SEE 39			
3004 51ST STREET EAST			
	(P.O. Box NOT acceptable)		
	BRADENTON,FLORIDA 34208		
The street addre as changed will	ss of its registered office and the street as be identical.	ddress of the business office of its registered agent,	
Such change wa authorized by the	is authorized by resolution duly adopted to board, or the corporation has been noti	by its board of directors or by an officer so fied in writing of the change.	
Jen (Signatu	re of an officer or director)	TIM WOODMAN OWNER (Printed or typed name and title)	
I further agree to of my duties, an document is bei	the appointment as registered agent and o comply with the provisions of all statut d I am familiar with and accept the obliging filed merely to reflect a change in the been notified in writing of this change.	agree to act in this capacity. es relative to the proper and complete performance ation of my position as registered agent. Or, if this registered office address, I hereby confirm that the	
1 Em Wo	odna	AUGUST 26TH 2008	
(Sig	nature of Registered Agent)	(Date)	
If signing on be	half of an entity:		
Г)	yped or Printed Name)		

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