## P01000002663





100055812681

06/15/05--01017--014 \*\*35.00

OS JUN 15 PM 1:24

SECURISSE FROMERA



## **COVER LETTER**

TO: Amendment Section Division of Corporations
SUBJECT: Selenus And Associates Inc (Name of corporation)
DOCUMENT NUMBER: 70100000 2663
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:
Mark Wapplo (Name of contact person)
Selenus And Associates, Inc. (Firm/Company)
826 Dodecanese Blue (Address)
Torpun Spring Fa 34689 (City/state and zip code)
For further information concerning this matter, please call:
Mark Wapplo at (727) 945.1963 (Name of contact person) (Area code & daytime telephone number)
Enclosed is a \$35.00 check made payable to the Department of State.
Malling Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314  Street Address: Amendment Section Division of Corporations Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399

## 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, this statement of change is submitted for a corporation organized under the laws of the State of <u>Flov.da</u> in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: Selenas And Associates Inc
2. The principal office address: 826 Dodecanese BlvO
Tarpon Spring, Fe 34689
3. The mailing address (if different):
4. Date of incorporation/qualification: 1/08/2001 Document number: 70100000 2663
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
Karen Bowden
Karen Bowden 201 Tarpin Industrial Dr +2
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):    James Van Ee   150   34   150   35   35   150   35   150   35   150   35   150   35   150   35   150   35   150   35   150   35   150   35   150   35   150   35   150   35   150   35   150   35   150   35   150   35   150   35   35   150   35   150   35   150   35   150   35   150   35   150   35   150   35   150   35   150   35   150   35   150   35   150   35   150   35   150   35   150   35   150   35   150   35   35   150   35   150   35   150   35   150   35   150   35   150   35   150   35   150   35   150   35   150   35   150   35   150   35   150   35   150   35   150   35   150   35   150   35   35   150   35   150   35   150   35   150   35   150   35   150   35   150   35   150   35   150   35   150   35   150   35   150   35   150   35   150   35   150   35   150   35   150   35   35   150   35   150   35   150   35   150   35   150   35   150   35   150   35   150   35   150   35   150   35   150   35   150   35   150   35   150   35   150   35   150   35   150   35   35   150   35   150   35   150   35   150   35   150   35   150
(P.O. Box NOT acceptable)
Tarpon Spring, Fr 34689
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, or the corporation has been notified in writing of the change.
Mark Wesslo (Signature of an officer or director)  Mark Wesslo (Printed or typed name and title)
l 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. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.
(Signature of Registered Agent)  (Date)
If signing on behalf of an entity:
James Vante (Typed or Printed Name)

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