## P0100060874

(Re	equestor's Name)			
	•			
(Ac	dress)			
•				
(Ad	dress)			
(Cit	ty/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
		v.		
(Bu	siness Entity Nar	ne)		
(Document Number)				
•				
Certified Copies	_ Certificates	of Status		
Special Instructions to	Filina Officer:			
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Office Use Only



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Ro Chy.



T. Roberts SEP 2 2 2006

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

## **COVER LETTER**

TO:	Amendment Section Division of Corporations			
CUDIE	CT: Steve Ruud Enterprises, Inc			
SUBJE	(Name of Co	orporation)		
DOCU	MENT NUMBER: P01000060874			
The end	closed Statement of Change of Registered Office	Agent and fee are submitted for filing.		
Please r	return all correspondence concerning this matter	to the following:		
	Steve Ruud			
	(Name of Con	tact Person)		
Steve Ruud Enterprises, Inc. (Firm/Company)				
	(* 33)			
	328 Commercial Street			
	. (Addr	ess)		
	Casselberry, Florida 32707			
	(City/State and	•		
For furt	her information concerning this matter, please ca	dl:		
Steve F	Ruud	at (407 ) 325-2721		
	(Name of Contact Person)	at (407) 325-2721 (Area Code & Daytime Telephone Number)		
Enclose	d is a \$35.00 check made payable to the Departr	nent of State.		
	Mailing Address: Amendment Section	Street Address:		
	Amendment Section Division of Corporations	Amendment Section Division of Corporations		
	P.O. Box 6327	Clifton Building		
	Tallahassee, FL 32314	2661 Executive Center Circle		
		Tallahassee, FL 32301		

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

•	•	17.0502, 607.1508, or 617.1508, Florida Stati organized under the laws of the State of Flo	
•	• •	registered agent, or both, in the State of Flori	
. 1. The name of	the corporation: Steve Ruud Enterp	prises, Inc.	
	office address: 328 Commercial S		
3. The mailing a	address (if different):		
4. Date of incor	poration/qualification: 6/14/2001	Document number: P010000608	874
	d street address of the current registertment of State:	ered agent and registered office on file with the	<b>26</b> <b>3</b> 5 <b>26</b>
	Steve Ruud		SEP
	5262 Clarion Hammock Dr	rive	22 AR SS
	Orlando, Florida 32808		PM 12: 2 Y OF STATEE, FLORI
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):			
	Steve Ruud		
	328 Commercial Street		
	(P.O. Box NOT acc		
	Casselberry, Florida 3270	1	
The street address changed will	ess of its registered office and the sbe identical.	street address of the business office of its re-	gistered agent,
Such change wa authorized by th	as authorized by resolution duly ac ne board, or the corporation has be	dopted by its board of directors or by an officen notified in writing of the change.	icer so
/Signatu	ire of an officer or director)	Steve Ruud / President (Printed or typed name and title)	
I hereby accept I further agree t of my duties, an	the appointment as registered age to comply with the provisions of al d I am familiar with and accept th	ent and agree to act in this capacity. Il statutes relative to the proper and complete to obligation of my position as registered age to in the registered office address, I hereby co tange.	te performance ent. Or, if this onfirm that the
9		18 September 2006	
	nature of Registered Agent)	(Date)	
If signing on bel	half of an entity:		
Steve Ruud			
(T	yped or Printed Name)		

Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

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

CR2E045 (8/05)