## 01000094025

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P. CONNELL FEB 1 8 2010

## **COVER LETTER**

TO: Amendment Section Division of Corporations							
SUBJECT: L & S FISH, INC.  Name of Corporation							
DOCUMENT NUMBER: P01000094025							
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:							
J. JON ASHBY, ESQ Name of Contact Person							
SANCHEZ & ASHBY, P.A.							
Firm/Company							
1720 N. ROOSEVELT BLVD.							
Address							
KEY WEST, FL 33040 City/State and Zip Code							
City/State and Zip Code							
damon@fishkeywestflorida.com							
E-mail address: (to be used for future annual report notification)							
For further information concerning this matter, please call:							
J. JON ASHBY at ( 305 ) 293-0084							
J. JON ASHBY at (305) 293-0084  Name of Contact Person 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							

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

statement of cha	nge is submitted for a co	rporation organized	07.1508, or 617.1508, Flor I under the laws of the State I agent, or both, in the State	e of FLORIDA		
	he corporation: L & S					
2. The principal	office address: 1801 N	. ROOSEVELT	BLVD., KEY WEST, F	FL 33040		
3. The mailing a	ddress (if different): 15	12 17TH TERR/	ACE, KEY WEST, FL	33040		
4. Date of incorp	oration/qualification:	09/26/2001	Document number:	P010000	94025	_
	street address of the cur tment of State: (If resign		t and registered office on fi	le with the		
	DAMON SANTELL	.]	·		·	
	3330 NORTHSIDE DR., #401				0 71	e true
	KEY WEST, FL 33	040			8 5	
6. The name and (if changed):	street address of the nev	w registered agent (i	f changed) and /or registere	ed office	A 6:	
	DAMON SANTELL				<b>نب</b> سند	
	1512 17TH TERRA	P.O. Box NOT ac				
	KEY WEST, FL 33		ceptable			
The street addre			dress of the business office	e of its register	ed agent.	
Such change was authorized by the	as authorized by resolut ne board, or the corpora	ion duly adopted b tion has been notif	y its board of directors or led in writing of the chang	by an officer so	)	
Signatu	re of an officer or director		Printed or typed nam	Sante (1)		
I hereby accept I further agree of my duties, ar document is bet corporation has	the appointment as reg to comply with the prov d I am familiar with an ng filed merely to reflec s been notified in writin	istered agent and a isions of all statute d accept the obliga a change in the r g of this change.	ngree to act in this capacit is relative to the proper an ation of my position as reg egistered office address, I	'y. id complete per istered agent. 'hereby confirm	formance Or, if this n that the	
1	/m 5.th	0	02/10	/10		
	nature of Registered Agent		Date	2 2		
, ,	•					
Т	yped or Printed Name	<del></del>				

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