POZ 000014640	
541 Associates, Inc. Requester's Name	
P. O. By 574181 Address	
Address Drando, Fla, 32857-4181 City/State/Zip Phone #	
Office Use Only	
CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known): 5 0000 5 3 46 855	
1. (Corporation Name) (Document #) #35, 10	
(Corporation Name) (Document #) #35. W	
2. (Corporation Name) (Document #)	
3. Filed to PD2-21588 in error, records (Corporation Name) (Document #)	-
4. Corrected 7/31/UZ* (Corporation Name) (Document #)	
☐ Walk in ☐ Pick up time ☐ Certified Copy	
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status	
NEW FILINGS AMENDMENTS 500 0	
□ Profit □ Amendment □ Amendment	n ·
Limited Liability Change of Registered Agent	
□ Other □ Merger □ □ Merger	
OTHER FILINGS REGISTRATION/QUALIFICATION	
Annual Report Fictitious Name Foreign Limited Partnership	-
Reinstatement Trademark Other	Z_
1/5/10	

CR2E031(7/97)

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1308, or 617.1308, Florida Statutes, the undersigned corporation organized under the laws of the State of
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: $S \notin L$ Associates, $\mp NC$
2. The mailing address of the corporation: P.O. Box 574 181
Ozlando, FL. 32857 - 418,
3. Date of incorporation/qualification: 2-8-02 Document number: Pozoco 1464
4. The name and address of the current registered agent and office:
Spiegel & UTZEZA, PA. FEB. # 1840 SW 22nd ST 4th FL.
0250 10
miami, FL. 33(45
5. The name and address of the new registered agent (if changed) and/or registered office (if changed) (P. O. Box Not Acceptable)
Ezic Santiago
251 Tuscany Points que.
0 Rlando - FL: 32807
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
6-21-02
(Signature of an officer, chairman or vice chairman of the board) (Date)
Printed or typed name and title)
(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.
(Signature of Registered Agent) (Date)
If signing on behalf of an entity:
ERIC Junting Texcident.
(Typed or Printed Name) (Capacity)
* * * FILING FEE: \$35.00 * * *
CR2E045(9/00) CR2E045(9/00) P.O. BOX 6327 TALLAHASSEE, FL 32314

P.O. Box 6327

DIVISION OF CORPORATIONS