

PO2000023906

LAW OFFICES

Paul M. Kade

Dadeland Towers North • Suite 400
9200 South Dadeland Boulevard
Miami, Florida 33156-2712

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

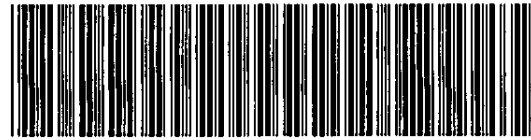
(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300187277083

11/05/10--01004--005 **35.00

11 NOV - 5 AM 10:55
FILED

PA Change

11/9/10

DL

**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 FLORIDA
in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: SOS FURNITURE COMPANY, INC.
2. The principal office address: 7473 PRESIDENT DRIVE
ORLANDO, FLORIDA 32809
3. The mailing address (if different): 7473 PRESIDENT DRIVE
ORLANDO, FLORIDA 32809
4. Date of incorporation/qualification: March 4, 2002 Document number: P02000023906
5. The name and street address of the current registered agent and registered office on file with the
Florida Department of State: (If resigned, enter resigned)

MADHAT SALEM

8826 PHILLIPS BAY DRIVE

ORLANDO, FLORIDA 32836

6. The name and street address of the new registered agent (if changed) and /or registered office
(if changed):

PAUL M. KADE, ESQ.

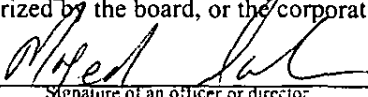
9200 SOUTH DADELAND BLVD., SUITE 400

P.O. Box NOT acceptable

MIAMI, FLORIDA 33156-2712

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.

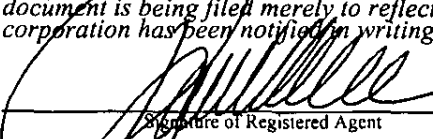


Signature of an officer or director

MAGED SALEM, PRESIDENT

Printed or typed name and title

*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. 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

11/3/10

Date

If signing on behalf of an entity:

Typed or Printed Name

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314