

P02000091379

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

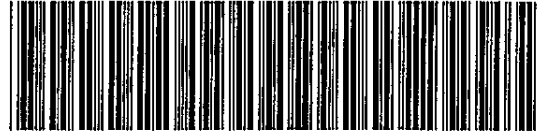
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TALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: S & S SALES, INC.
(Name of corporation)

DOCUMENT NUMBER: P02000091379

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:

BRITT SHENKMAN
(Name of person)

S & S SALES, INC.
(Name of firm/company)

99 GEORGE KING BLVD.
(Address)

CAPE CANAVERAL, FL 32920
(City/state and zip code)

For further information concerning this matter, please call:

LINDA OHLIN at (321) 784-9000
(Name of 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
409 E. Gaines Street
Tallahassee, FL 32399

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TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

July 26, 2004

BRITT SHENKMAN
S & S SALES, INC.
99 GEORGE KING BLVD.
CAPE CANAVERAL, FL 32920

SUBJECT: S & S SALES, INC.
Ref. Number: P02000091379

We have received your document for S & S SALES, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6964.

Irene Albritton
Document Specialist

Letter Number: 004A00046908

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DIVISION OF CORPORATIONS

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: S & S SALES, INC.

2. The principal office address: 99 GEORGE KING BLVD
CAPE CANAVERAL, FL 32920

3. The mailing address (if different): _____

4. Date of incorporation/qualification: 8/21/2002 Document number: P02000091379

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:


BRITT R. SHENKMAN
99 GEORGE KING BLVD.
CAPE CANAVERAL, FL 32920

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

MARLIN D. SWANSON
99 GEORGE KING BLVD
(P.O. Box or personal mailbox NOT acceptable)
CAPE CANAVERAL, FL 32920


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)

BRITT R. SHENKMAN, REGISTERED AGENT
(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)

1/2/04
(Date)

If signing on behalf of an entity:

MARLIN D. SWANSON
(Typed or Printed Name)

Registered Agent.
(Capacity)

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

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

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TALLAHASSEE, FLORIDA