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COVER LETTER

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
Tallahassee, FL 32301

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 in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: Sheridan Enterprises Group, Inc.
2. The principal office address: 225 S. Hiauxise Road Stc. 201
Orlando. FL 32835
3. The mailing address (if different): SCIME (IA) CUSTIC.
4. Date of incorporation/qualification: <u>09/00/2002</u> Document number: <u>P020009(0208</u>
 The name and street address of the eurrent registered agent and registered office on file with the Florida Department of State:
2295 S. Hawassee Rood Ste 201
Orlando FL 32835
OF MAN ARE SET
6. The name and street address of the new registered agent (if changed) and /or registered office with the control of the new registered agent (if changed) and /or registered office with the control of the new registered agent (if changed) and /or registered office with the control of the new registered agent (if changed) and /or registered office with the control of the new registered agent (if changed) and /or registered office with the control of the new registered agent (if changed) and /or registered office with the control of the new registered agent (if changed) and /or registered office with the control of the new registered agent (if changed) and /or registered office with the control of the new registered agent (if changed) and /or registered office with the control of the new registered agent (if changed) and /or registered office with the control of the new registered agent (if changed) and /or registered office with the control of the new registered agent (if changed) and /or registered agent (if changed) are registered agent (if changed) agent (if changed) are registered agent (if changed) are registere
6996 Piasza Grande Art 5 202
Orlando, FL 32835
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.
(Frinted or typed name and title) JAMES SHERIDAN / 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) O7-25-07 (Date)
If signing on behalf of an entity:
JOVEN ASSOCIATES INC. (Typed or Printed Name)

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