## P03000039902

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## TRANSMITŢAL LETTER

Amendment Section Division of Corporations

TO:

SUBJECT. D : C MODITE ENTEDDRISES INC		i şi	
SUBJECT: R & S MOBILE ENTERPRISES, INC. (Name of corporation)	<u> </u>		
DOCUMENT NUMBER: P03000039902	<u>a a la companyone di militari na militari</u>	: <u>ķ</u> ₹ ე <mark></mark>	<u> </u>
The enclosed Statement of Change of Registered Office/Agent and fee	are submitted for filing.		
Please return all correspondence concerning this matter to the followin	g:		
PAUL D. SULLIVAN, ESQ.			
(Name of person)			
• ,			
(Name of firm/company)		•	
520 E. OLYMPIA AVE.			
(Address)			
PUNTA GORDA, FL 33950			
(City/state and zip code)		-	
For further information concerning this matter, please call:			
PAUL D. SULLIVAN  (Name of person)  at (	941 ) 637-5900 (Area code & daytime telephone num	iber)	· •••
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		

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

change is submit	provisions of sections 607.0502, 617.05 ted for a corporation organized under istered office or registered agent, or bo	the laws of the State of ${ t FLORIDA}$	•
	he corporation: R & S Mobile E	·	
	office address: 25191 E. 01ymp1		
**************************************		L 33950	
3. The mailing ac	ddress (if different):	- · ·	
4. Date of incorp	oration/qualification: 4/3/03	Document number: P0300	0039902
	street address of the current registered tment of State:	agent and registered office on file w	ith the
	STEPHEN M. MAHER, ESQ	•	
	2077 FIRST ST., STE.	206	we of the second
	FORT MYERS, FL 33901		100 P
6. The name and (if changed):	street address of the new registered ag	ent (if changed) and /or registered of	fice The Story of
	PAUL D. SULLIVAN, ESQ	•	
	520 E. OLYMPIA AVE.	_1	िन्तुं ज
	(P.O. Box or persona	l mailbox NOT acceptable)	Dr.
	PUNTA GORDA, FL 33950	<u> </u>	<u> </u>
The street addre changed will be	ss of its registered office and the stree identical.	et address of the business office of	its registered agent, as
Such change wa	s authorized by resolution duly adopt corporation has been notified in write	ed by its board of directors or by a sing of the change.	n officer so authorized by
Lay Bel	Inablife of an officer or director)		BELILES d name and title)
I hereby accept I further agree t duties, and I am being filed mere been notified in	the appointment as registered agent of comply with the provisions of all standard with and accept the obligated to reflect a change in the registere writing of this change.	and agree to act in this capacity, atutes relative to the proper and co on of my position as registered age d office address, I hereby confirm t	mplete performance of my mt. Or, if this document is hat the corporation has
Iald	Selly	3/26/0.	
	(Signature of Registered Agent) half of an entity:	ţ	<i>waw</i> ,
	(Typed or Printed Name)	(C	apacity)

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