## P03000103424

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
V





500131064685

08/10/08--01011--002 ++35.00

PILED

08 JUNIO PH 2: 02

DECRETARY OF STATE
AHASSEE FLORIDA

Or How

## **COVER LETTER**

TO: Amendment Section Division of Corporations
SUBJECT: Grines Air (ond) horing of the Treasure Coasi
DOCUMENT NUMBER: PU3 UUUL 03424
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:
Keun Grimes
(Name of Contact Person) ·
(Firm/Company)
Straf FC 34994
(Address)
(City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Contact Person) at (Area Code & Daytime Telephone Number)
(Name of Contact 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
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 Flylle
in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: Gimes Air land, turing of the Trease (4)+ Inc
2. The principal office address: 618 SE Central Parkeray
Strat 18 34994
3. The mailing address (if different): 22 Eden Geek Can
Jenson Keich, FC 34977
4. Date of incorporation/qualification: Document number:
5. The name and street address of the current registered agent and registered office on file with the
Florida Department of State:
STEVE G. VIRE
32-C, SE 0940/a St. 92 0 -
Stratt FC 34994
6. The name and street address of the new registered agent (if changed) and /or registered office.
(if changed):  Steven G. 1/46 Esq.
50 SE Clean R/vd. # 202
Study P.O. Box NOT acceptable)  Study P.O. Box NOT acceptable)
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 Keyn W. Granes authorized by the board, or the corporation has been notified in writing of the change.
1 / Llut 1 5/29/08 (pres.)
(Signature of an officer of dissertor) (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 potified in writing of this change.
5/27/04
(Signature of Registered Agent) (Date)
If signing on behalf of an entity:
(Typed or Printed Name)

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