PO400041703

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	<u> </u>
(Cit	ty/State/Zip/Phone	⇒ #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	<u>. </u>
Certified Coples	_ Certificates	of Status
Special Instructions to Filing Officer.		

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TRANSMITTAL LETTER

Amendment Section Division of Corporations

TO:

Dish Olessa Jan				
SUBJECT: Dick Olson, Inc. (Name of corporation)				
DOCUMENT NUMBER: p04000041703				
The enclosed Statement of Change of Registered Office/Agent and	fee are submitted for filing.			
Please return all correspondence concerning this matter to the follow	wing:			
Dick A. Olson				
(Name of person)				
Dick Olson, Inc.				
(Name of firm/company)				
56 Trade Wind Drive (Address)				
Santa Rosa Beach, Fl. 32459				
(City/state and zip co	de)			
For further information concerning this matter, please call:				
Dick Olson a	t (612) 965-6605			
(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			

CR2E045(09/03)

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

•	provisions of sections 607.0502, 617.0502, 607.1. tted for a corporation organized under the laws o	508, or 617.1508, Florida Statutes, this statement of f the State of _Florida in order
to change its reg	istered office or registered agent, or both, in the l	State of Florida.
1. The name of t	he corporation: Dick Olson, Inc.	
2. The principal	office address: 56 Trade Wind Drive	
Santa Rosa	Beach, Fl. 32459	
3. The mailing a	ddress (if different):	
4. Date of incorp	poration/qualification: February 26th, 2004 Do	cument number: p04000041703
	street address of the current registered agent and tment of State:	registered office on file with the
	Dick A. Olson	
	501-507 HWY 190	···
	Valparaiso, Fl. 32580	产品 五
6. The name and (if changed):	street address of the new registered agent (if char	77
	Dick A. Olson	
	56 Trade Wind Drive	27 CRAFT 27
	(P.O. Box or personal mailbox NO	T acceptable)
	Santa Rosa Beach, Fl. 32459	
The street addre	ss of its registered office and the street address identical.	of the business office of its registered agent, as
Such change wa	is authorized by resolution duly adopted by its become of the	poard of directors or by an officer so authorized by change.
	MILL	Dick Olson, President
I hereby accept I further agree t duties, and I am being filed mere	ignature of an officer or director) the appointment as registered agent and agree to comply with the provisions of all statutes rela familiar with and accept the obligation of my p ly to reflect a change in the registered office ad writing of this change.	(Printed or typed name and title) to act in this capacity. tive to the proper and complete performance of my position as registered agent. Or, if this document is dress, I hereby confirm that the corporation has
		05-25-04
	Signature of Registered Agent)	(Date)
If signing on be	half of an entity:	
	(Typed or Printed Name)	(Capacity)

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