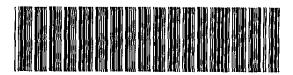
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COVER LETTER

Division of Corporations		
SUBJECT: Shryke Technologics, Inc. (Name of Corporation)		
DOCUMENT NUMBER: P04000052094		
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:		
Daniel Farcus (Name of Contact Person)		
Shryke Technologies (Firm/Company)		
9901 West Bap Harbor Dr. #A1 (Address)		
Boy Harbor, Fl 33154 (City/State and Zip Code)		
For further information concerning this matter, please call:		
Daniel Farcus at 305, 753 5629 (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

statement of change is submitted for a corporation organize	ed under the laws of the State of \hfill florifa
in order to change its registered office or registere	ed agent, or both, in the State of Florida.
1. The name of the corporation: Shryke Technol	
2. The principal office address: 9901 West	Boy Harbor Dr #A!
Bay Harbor	11 33154
3. The mailing address (if different):	
4. Date of incorporation/qualification: 3/24/04	Document number: <u>P04000052094</u>
5. The name and street address of the current registered age Florida Department of State:	and registered office on file with the くれ、「ATCUS Colluis Ave #1207
Mami	Beach Fl 33141
6. The name and street address of the new registered agent (if changed): DONICLE 9901 West Box Horbor (P.O. Box NOT acceptable)	(if changed) and /or registered office FACUS Bay Harber Dr # A1 F1 33154
The street address of its registered office and the street as as changed will be identical.	ddress of the business office of its registered agent,
Such change was authorized by resolution duly adopted authorized by the board, or the corporation has been noti	by its board of directors or by an officer so fied in writing of the change.
Signature of an officer or director)	Daniel Farcus, President (Printed or typed name and title)
I hereby accept the appointment as registered agent and I further agree to comply with the provisions of all statut of my duties and I am familiar with and accept the oblig document is being filed merely to reflect a change in the corporation has been notified in writing of this change.	agree to act in this capacity. es relative to the proper and complete performance ation of my position as registered agent. Or, if this registered office address, I hereby confirm that the
e H	9/14/05
(Signature of Registered Agent)	(Date)
If signing on behalf of an entity:	
(Typed or Printed Name)	

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

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