P04000072538

Streetman (Requestor's Name)			
1005 N Marion St (Address)			
Tampa Fl 33602			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			
·			

Office Use Only



400156773434

06/04/09--01031--014 **35.00

2009 JUN -4 AMII: 43 SECRETARY OF STATE ALL AMASSEF, FLORID

R.A.
TB 6/5/09

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida inge is submitted for a corporation organized under the laws of the State of ir to change its registered office or registered agent, or both, in the State of	FLORIDA	
		rioriaa.	
1. The name of	the corporation: SABOT 6, INC.	; ; ; .	
2. The principal	office address: 2429 ARBORWOOD DR VALRICO FL 33596		
	,	· .	
3. The mailing a	address (if different):		
4. Date of incorp	poration/qualification: 04 MAY 2004 Document number:	P04000072538	
	I street address of the current registered agent and registered office on file wrtment of State: (If resigned, enter resigned)	vith the	•
	LEONA A. NOLAN	·	
	2429 ARBORWOOD DR	2	
	VALRICO FL 33596	SECH SECH	П
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered o	· · · · · · · · · · · · · · · · ·	二 [T
	STREETMAN LAW	AM 11: 43 SEE. FLORID	C
	1005 N MARION ST	- DATE	
	P.O. Box NOT acceptable	D. Co	
	TAMPA FL 33602	_	
The street address changed will	ess of its registered office and the street address of the business office of be identical.	its registered agent,	
Such change wanthorized by the	as authorized by resolution duly adopted by its board of directors or by a he board, or the corporation has been notified in writing of the change.	n officer so	
Signatu	DANIEL A. NOLAN Printed or typed name and	III, CEO	
I hereby accept I further agree of my duties, ar document is be corporation ho	the appointment as registered agent and agree to act in this capacity to comply with the provisions of all statutes relative to the proper and cond Lam familiar with and accept the obligation of my position as register in the registered office address, I here to be notified in writing of this change.	omplete performance red agent. Or, if this eby confirm that the	
-///	maddress Rogistered Agent Date	7	
If signing on be	chalf of an entity:		
	GAN W. STREETMAN		
1	yped or Printed Name		

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