P0400086258

(Req	uestor's Name)	
(Add	ress)	
(Add	iress)	<u> </u>
(City	/State/Zip/Phone #)
PICK-UP		MAIL
(Bus	iness Entity Name)
(Doc	ument Number)	
Certified Copies	Certificates o	Status
Special Instructions to F	iling Officer:	
<u> </u>	Office Use Only	ل ان <u>ہے ہے جست میں م</u> یں م

.

-



06/17/04-01026--019 **35.00





TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations	·
SUBJECT: VULCAN AIR INC. (Name of corporation)	
DOCUMENT NUMBER: <u>P04000086258</u>	
The enclosed Statement of Change of Registered Office/Agent and fee are submitted f	or filing.
Please return all correspondence concerning this matter to the following:	
JEFF WEST (Name of person)	
VULCAN AIR INC. (Name of firm/company)	
P.O. Box 292461 (Address)	
TAMPA, FL. 33687 (City/state and zip code)	
For further information concerning this matter, please call:	

<u>JEFF WEST</u> (Name of person) at (<u>813</u>) <u>843-2580</u> (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

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 $\underline{FLORIDA}$ in order to change its registered office or registered agent, or both, in the State of Florida.

I. The name of the corporation: VULCAN AIR INC.
2. The principal office address: 9402 HARNEY RO.
THONOTOSASSA FL, 33592
3. The mailing address (if different): POBOX 292461
TAMPA, FL. 33687
4. Date of incorporation/qualification: <u>6-1-04</u> Document number: <u>P04000086258</u>
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
MAX D. SYSK PRES.
9402 HARNEY RD ISA B
THONO TO SASSA, FL, 33592 第二
6. The name and street address of the new registered agent (if changed) and /or registered office
JEFF WEST PRES.
(P.O. Box or personal mailbox NOT acceptable)
TAMPA, FL. 33612
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 authorized by the board, or the corporation has been notified in writing of the change.
(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 outies, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is

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 notified in writing of this change.

(Signature of Registered Agent)

If signing on behalf of an entity:

<u>JEFF</u> WEST (Typed or Printed Name)

6-14-04

(Date)

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

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