P04000098681

(Requestor's Name)	
(Address)	
(Address)	
,	
(City/State/Zip/Phone #)	
(5)13/5:20.52.14// 110110 //	
PICK-UP WAIT N	1AIL
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	
opena, menadana ta 1 mmg amaan	}
	1
	ł
	1
	{
	1
	}





400052271094

04/28/05--01017--011 **35.00

05 APR 28 AM IO: 33 SECRETALIT OF STATE TALLARITS STEEL TO STATE

R.A. Chork

C. Coullierte MAY 0 5 2005

COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Suncoast Notary Inc. (Name of corporation)
DOCUMENT NUMBER:
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:
Marke of contact person) (Name of contact person)
Suncoast Notary Jac.
11407 Tucker Road
Riverview To 33569 (City/state and zip code)
For further information concerning this matter, please call:
Amy 5. Byers at 813, 690. 5188 (Name of contact person) (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 409 E. Gaines Street Tallahassee, FL 32399
Please Change segistered Agent FROM: Scott Schooler- Tergensen
TO: Amy S. BYEKS

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
	in order to change its registered office or registered agent, or both, in the State of Florida.
	1. The name of the corporation: Sunccast Notary, Inc.
	2. The principal office address: 5224 South Pulitan Ave
	1ampa, [2 3361]
	3. The mailing address (if different):
	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:
	Scott Schroder-Dorgensen 2 2 2
	5224 South Puritan Ave = = =
	Tampa, FZ 33611
	6. The name and street address of the new registered agent (i) changed (and registered office (if changed):
	Amy S. Byers REG. AGEN
المكا	11407 Tucker Road
MODRESS -	(P.O. Box NOT acceptable)
יניטא	Kyerven, 12 33569 F Manual
	The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.
	Sugh 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.
	(Signature of an officer of director) Scott Schrodoeve - Trustense N (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 notified in writing of this change.
	(Signature of Registered Agent) 2/24/05 (Date)
	If signing on behalf of an entity:
•	Suncoast Notary Fre. (Typed or Printed Name)

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