## P05000033573

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. (R	equestor's Name)	
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(C	ity/State/Zip/Phone #)	<u></u>
PICK-UP	☐ WAIT	MAIL
(B	usiness Entity Name)	
(D	ocument Number)	
Certified Copies:	Certificates of St	atus <u>in the same</u>
Special Instructions to	Filing Officer:	
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SECRETARY OF STATE

R.A.

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## **COVER LETTER**

TO: Amendment Section Division of Corporations
SUBJECT: S + SH Holding INC  Name of Corporation
DOCUMENT NUMBER: \$\int 5000033573
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:
A. Phillip Cogtes Name of Contact Person
St St Holding Firm/Company
$\frac{P. O. 130 \times 5403}{Address}$
BRACENHON, F1 34281 City/State and Zip Code  PSCHWANZE Tampa Bay, RR. Com  E-mail address: (to be used for future annual report notification)
·

Enclosed is a \$35.00 check made payable to the Department of State.

For further information concerning this matter, please call:

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



## FLORIDA DEPARTMENT OF STATE Division of Corporations

November 6, 2009

A PHILLIP COATES S &SH HOLDING, INC. PO BOX 5403 BRADENTON, FL 34281

SUBJECT: S &SH HOLDING, INC.

Ref. Number: P05000033573

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We have received your document for S &SH HOLDING, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Florida law requires the street address of the principal office and, if different the mailing address of the entity. A post office box is not acceptable for the principal office.

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6925.

Teresa Brown Regulatory Specialist II

Letter Number: 909A00035026

## 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: 3 +SH Holding, Inc.
2. The principal office address: 2321 Pennslyvania Aur Box 540.
Bradenton, FL 34281
3. The mailing address (if different):
4. Date of incorporation/qualification: 3/4/2005 Document number: P05 00003357.
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)
Robert E Sherriff Po 3
2342 Oakford Rd 显音
Sarasota, FL 34240
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):  A. Phillip Coates
2321 Pennslyvania Ave Box 5403
Bradenton, FL 34281
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.
Signature of an officer or director  A Phillip Coates
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  11-18-09  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 \* \* \*