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COVER LETTER

Division of Corporations
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Amendment Section

SUBJECT: SSD Consulting Services, Inc.
(Name of Corporation)

DOCUMENT NUMBER: POSOOO 345/H

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:

TOSTIN TEICE

(Name of Contact Person)

SSD CONSULTING SERVICES INC.

(Firm/Company)

405 10. PROSPECT Red.

(Address)

OAKIAND PARK, IT 33309

(City/State and Zip Code)

For further information concerning this matter, please call:

(Name of Contact Person) at (754) 422-3504 (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

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 Florida. in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: SSD COWSCICTING SENVICES JU
2. The principal office address: 405 W. Newspect Rel. OAKLAND PK
3. The mailing address (if different): SAME AS ANSOVE
4. Date of incorporation/qualification: 3/7/05 Document number: P050000345/4
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
SHIRAZ DHAWSI
10850 FOX GLEN
BOCA RATION, FL 33428
6. The name and street address of the new registered agent (if changed) and /or registered office RASSING TEILE 405 W. PROSPECT Rd. (P.O. Box NOT acceptable) ORKINAD, PL. 333309.
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.
Y JUSTIN TEILE, DIR (Signature of an officer or director) (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) (Date)
If signing on behalf of an entity: TUSTIW TEILE. (Typed or Printed Name)

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