Florida Department of State

Division of Corporations Public Access System

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Division of Corporations

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From:

Account Name : UCC FILING & SEARCH SERVICES, INC.

Account Number : 119980000054 Phone

: (850) 681-6528

Fax Number

: (850) 681-6011

REGISTERED AGENT CHANGE

SKY HOLDINGS GROUP, INC.

Certificate of Status	0
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Page Count	01
Estimated Charge	\$35.00

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Corporate Filing Menu

May ro

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

Pursuant to the provisions of sections 607.0302, 617.0302, 607.1308, or statement of change is submitted for a corporation organized under the in order to change its registered office or registered agent, or the income in order to change its registered of the organized agent, or the income in order to change its registered of the organized agent, or the org	laws of the State of Florida
1. The name of the corporation: SKY HOLDINGS GROUP, INC.	·
2. The principal office address: 12020 N.W. 12TH STREET, PLANTAT	ION, FL 33323
3. The mailing address (if different):	
4. Date of incorporation/qualification: 7/11 05 Docume	nt number: P05000097279
5. The name and street address of the current registered agent and regist Florida Department of State:	ered office on file with the AAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAA
UCC FILING & SEARCH SERVICES, INC.	THE PARTY I
1574 VILLAGE SQUARE BLVD. STE 100	GF STA
TALLAHASSEE FL 32309	7A TATE
6. The name and street address of the new registered agent (if changed) (if changed):	and /or registered office
JOHN JOHANSEN	
12020 N.W. 12TH STREET	
(P.O. Box NOT acceptable) PLANTATION FL 33323	
The street address of its registered office and the street address of the as changed will be identical.	: business office of its registered agent,
Such change was authorized by resolution duly adopted by its board authorized by the board, or the corporation has been notified in writing	of directors or by an officer so ng of the change.
	HANSEN -PRESIDENT
I hereby accept the appointment as registered agent and agree to act I further agree to comply with the provisions of all statutes relative to of my duties, and I ani familiar with and accept the obligation of my document is being filed merely to reflect a change in the registered of corporation has been notified in writing of this change.	in this capacity, o the proper and complete performance position as registered agent. Or, if this fire address, I hereby confirm that the
JOHN JO	HANSEN (Dale)
8/24/07	
(Typed or Printed Name) * * * FILING FEE: S35.00 * *	* *

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (\$105)