## P06000100060

(Requestor's Name)							
(10410010101)							
(Address)							
(Address)							
(City/State/Zip/Phone #)							
PICK-UP WAIT MAIL							
(Business Entity Name)							
(Document Number)							
Certified Copies Certificates of Status							
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SECRETARY OF STATE

APPROVE:

V/1/2/V

## **COVER LETTER**

TO:	Amendmen Division of	t Section Corporations							
SUBJECT: S & S DECORATIVE TILES, INC  Name of Corporation									
DOCUMENT NUMBER: P06000100060									
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:									
HERBERT B. SHATTAN Name of Contact Person									
S & S DECORATIVE TILES, INC									
Firm/Company									
	8890 BOATSWAIN DRIVE								
	Address								
BOYNTON BEACH, FL 33436  City/State and Zip Code									
SHATTZgoFUR@aol.com  E-mail address: (to be used for future annual report notification)									
E-man address. (to be used for future annual report nouncemen)									
For further information concerning this matter, please call:									
	HERI	BERT. B. SHATTAN	at ( 561 ) 21	71-7348					
	Nam	e of Contact Person	at (561) 2 Area Code & Daytime Tel	ephone 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 Corporat Clifton Building 2661 Executive Cen Tallahassee, FL 323	ter Circle					

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

statement of cha	provisions of sections 60 inge is submitted for a co er to change its registere	orporation organized	l under the laws of the	State of Florida	his 	
1. The name of t	the corporation: S & S	DECORATIV	E TILES, INC		····	
2. The principal	office address: 8890 E	BOATSWAIN DR	IVE	<u></u>		
	BOYN	ITON BEACH, FI	L 33436			
3. The mailing a	nddress (if different):					
4. Date of incorp	poration/qualification: _	July 31, 2006	_ Document number:	P060001	100060	
	d street address of the curtment of State: (If resign		t and registered office	on file with the		
	HERBERT B. SH	ATTAN				
	2909 S. OCEAN E	BLVD., STE. 3A		, °		
	HIGHLAND BEAC	CH, FL 33487			09 NOV SECRET	
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):						
	HERBERT B. SHA	ATTAN			TARY OF	
	8890 BOATSWAI				<u>_</u>	
	DOMESTICAL DE AC	P.O. Box NOT acc	ceptable		TATE ORIDE	
	BOYNTON BEAC		<u> </u>	•	, L.	
The street address changed will	ess of its registered offi be identical.	ce and the street add	lress of the business of	office of its register	red agent,	
Such change wa	as authorized by resolute board, or the corpora	tion duly adopted by	tis board of directors	s or by an officer s	3O	
He	up of an officer of director		Herbert I	B. Shatt	an	
Sig	the appointment as reg to comply with the pro- nd I am familiar with a ing filed merely to refle is been notified in writing the property of Registered Agent	gistered agent and a visions of all statute nd accept the obliga ct a change in the re ng/of this change.	gree to act in this cap is relative to the prope tion of my position as egistered office addre.	racity, rand complete pe registered agent. ss, I hereby confin	rformance Or, if this m that the	
	chalf of an entity:	···		•	•	
Т	yped or Printed Name					

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (8/05)

APPROVED FILED