

P0800004/551

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## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** SEABRIDGE TEAM II, INC.  
Name of Corporation

**DOCUMENT NUMBER:** P08000041551

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:

BENJAMIN A. RITGER  
Name of Contact Person

SEABRIDGE TEAM II, INC.  
Firm/Company

2872 JOHN ANDERSON DR  
Address

ORMOND BEACH, FL 32176-2327  
City/State and Zip Code

benjaminritger@yahoo.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

BENJAMIN ANDREW RITGER at ( 386 ) 405-2613  
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  
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: SEABRIDGE TEAM II, INC.
2. The principal office address: 2872 JOHN ANDERSON DR  
ORMOND BEACH, FL 32176-2327
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 04/23/2008 Document number: P08000041551
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)

RESIGNED

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

BENJAMIN ANDREW RITGER

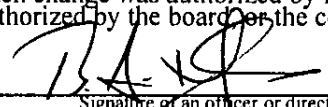
2872 JOHN ANDERSON DR

P.O. Box NOT acceptable

ORMOND BEACH, FL 32176-2327

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

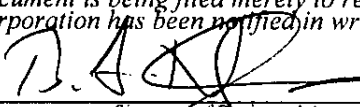
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board or the corporation has been notified in writing of the change.

  
Signature of an officer or director

BENJAMIN ANDREW RITGER

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

10/01/2010

Date

If signing on behalf of an entity:

Benjamin A. Ritger  
Typed 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

10 NOV 12 AM 1:58  
TALLAHASSEE, FL 32314  
SECRETARY OF STATE