

PO800078356

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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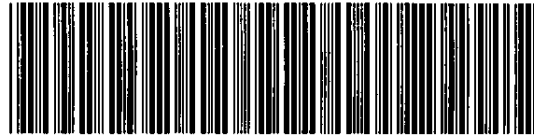
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

R.A. Chong

AC

OCT 06 2008

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Southern Storm Kennels, Inc. +  
(Name of Corporation)

**DOCUMENT NUMBER:** F05000001617

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:

Renee Schimansky  
(Name of Contact Person)

Southern Storm Kennels, Inc  
(Firm/Company)

17210 35th Place North  
(Address)

Loxahatchee, FL 33470  
(City/State and Zip Code)

For further information concerning this matter, please call:

Renee Schimansky at ( 561 ) 422-9889  
(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: Southern Storm Kennels, Inc.
2. The principal office address: 17210 35th Place North, Loxahatchee, Florida 33470
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 02/09/2005 Document number: \_\_\_\_\_
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)

CORPORATE CREATIONS NETWORK, INC.

11380 PROSPERITY FARMS ROAD #221E

PALM BEACH GARDENS FL 33410 US

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

Renee Schimansky

17210 35th Place North

(P.O. Box NOT acceptable)

Loxahatchee, Florida 33470

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.

R. Schimansky  
(Signature of an officer or director)

Renee Schimansky  
(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.

R. Schimansky  
(Signature of Registered Agent)

9/25/2008  
(Date)

If signing on behalf of an entity:

alkfjsaldkfi  
(Typed or Printed Name)

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

**FILED**  
08 SEP 29 AM 9:14  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA