

P090000/2027

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

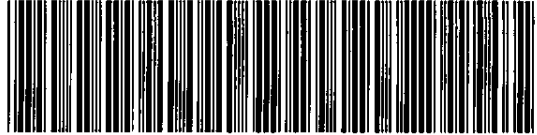
(Business Entity Name)

(Document Number)

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2009 DEC -7 P 4: 20
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RA change
New
12-8-09

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: SRISAT INC
Name of Corporation

DOCUMENT NUMBER: P09 0000 12027

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:

KRISHNAMURTHY NOOKA
Name of Contact Person

SRISAT INC
Firm/Company

1828 SW, 163 Ave
Address

MIRAMAR, FL 33027
City/State and Zip Code

nooka8@yahoo.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

KRISHNAMURTHY NOOKA at (305) 527-6665
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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 19, 2009

KRISHNAMURTHY NOOKA
SRISAT INC
1828 SW 163 AVENUE
MIRAMAR, FL 33027

SUBJECT: SRISAT INC
Ref. Number: P09000012027

We have received your document for SRISAT INC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The above entity is a Florida corporation and the document and fee submitted are for a Florida limited liability company. The correct form is enclosed and an additional filing fee of \$10.00 is due.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6905.

Thelma Lewis
Document Specialist Supervisor

Letter Number: 409A00036053

2009 DEC -7 AM 8:00
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

**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 _____ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: SRISAT INC
2. The principal office address: 1828 SW, 163 AVE
MIRAMAR, FL 33027
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 02/06/2009 Document number: P09000012027
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)

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 W

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

KRISHNAMURTHY NOOKA
1828 SW, 163 AVE
P.O. Box NOT acceptable
MIRAMAR, FL 33027

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] (KRISHNAMURTHY NOOKA)
Signature of an officer or director

KRISHNAMURTHY NOOKA (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]
Signature of Registered Agent

11/30/2009
Date

If signing on behalf of an entity:

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
CR2E045 (8/05)

FILED
2009 DEC -7 P 14:20
SECRETARY OF STATE
TALLAHASSEE, FLORIDA