P09000059408

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FEB 26 2010

EXAMINER

COVER LETTER

TO:	Amendment Section Division of Corporations
SUBJ	ECT: Samp Corporation Name of Corporation
DOC	UMENT NUMBER: P090000 59408
The er	nclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please	return all correspondence concerning this matter to the following:
	Name of Contact Person
	Firm/Company
	837 Fr/sh And S Address
	Maples FC 34102 City/State and Zip Code
	E-mail address: (to be used for future annual report notification)
For fu	rther information concerning this matter, please call:
	Tim Amirschi's at (239) 438-0000 Name of Contact Person Area Code & Daytime Telephone Number
Enclo	sed 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 \[\int \lambda_{\text{c}} \subseteq \frac{\text{flor} \subseteq \text{d}}{\text{c}} \] in order to change its registered office or registered agent, or both, in the State of Florida.		
1. The name of the corporation: Sanas Corporation:		
1. The name of the corporation: Sanap Corporation: 2. The principal office address: 420 Lee Boulevard, Le Ligh Acres, FL 33936		
3. The mailing address (if different):		
4. Date of incorporation/qualification: 7-10-09 Document number: Po90000 5940 8		
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)		
Siegfied Jours		
Siegfried Journe 420 See Blad Fig. 3		
Lehigh Unes FL 33936 DA TO		
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):		
clo Jim Bo Amirsakis/Keaking Jssoc. 25		
837 Fifth Am S, Naples FL 34102		
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 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 Date		
If signing on behalf of an entity: Tim Amir Saks Typed or Printed Name		

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