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SECRETARY OF STATE VALLAHASSEE, FLORIBA

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C. LEWIS
NOV 6 2013
EXAMINER

APPROVES

COVER LETTER

TO: Amendment Section Division of Corporations

_{subject:} southern suncoast, inc.

Name of Corporation

DOCUMENT NUMBER: p10000022006

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:

g.w. briggs

Name of Contact Person

southern suncoast inc

Firm/Company

2827 cantegra glen

Address

escondido, ca 92025

City/State and Zip Code

gwbriggsfinancial@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

gw briggs

,760

743-7238

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

statement of cha	provisions of sections 607.0502, 617.0 ange is submitted for a corporation org	ganized under the laws of the State o	f florida	
in orde	er to change its registered office or reg	istered agent, or both, in the State of	f Florida.	
1. The name of	the corporation: southern suncoa	ast, inc.		
2. The principal	office address: 400 s. atlantic av	ve daytona beach, fl 32118		
3. The mailing a	address (if different): 2827 canteg	ra glen escondido, ca. 920	25	
4. Date of incor	poration/qualification: 03-11-2010	Document number: p100	00022006	
	d street address of the current registere rtment of State: (If resigned, enter resig		with the	
	resigned		_	
			_	
6. The name and (if changed):	d street address of the new registered a	gent (if changed) and /or registered of	SECRET	3
	gary atkinson		ASSI -t	FA:
	400 s. atlantic ave			
P.O. Box NOT acceptable			- LGRA -: 3	;
	daytona beach, fl 32118		_ \$\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	
_	ess of its registered office and the stre be identical.			
Such change was authorized by the	as authorized by resolution duly adopt be board, or the corporation has been	-	n officer so	
Signatu	ire of an officer or director	gw briggs pres Printed or typed name and to	itle	
	the appointment as registered agent of to comply with the provisions of all st my duties, and I am familiar with and is document is being filed merely to re that the corporation has been notified			
Sulfa	man	10-29-13		
Sig	nature of Registered Agent	Date		
If signing on be	chalf of an entity:			
gw briggs				
T	yped or Printed Name			

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MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (03/12)

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