CT Comp Sustern Requester's Name	
1 20 Grand Carner Arc	
Address	
City/State/Zip Phone #	

H30602751511--2 -01/22/99--01074--005 *****35.00 *****35.00

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1.		
2.	(Corporation Name)	(Document #)
3.	(Corporation Name)	(Document #) SSEC A
<i>3</i> . 4.	(Corporation Name)	(Document #)
⊸.	(Corporation Name)	(Document #)
	Walk in Pick up time	Certified Copy
	Mail out Will wait	Photocopy Certificate of Status
<u>]</u>	NEW FILINGS	AMENDMENTS
[Profit	Amendment
	Not for Profit	Resignation of R.A., Officer/Director
, ,	Limited Liability Domestication	Change of Registered Agent Dissolution/Withdrawal
ļ	Other	☐ Merger
9	OTHER FILINGS	REGISTRATION/QUALIFICATION
	Annual Report Fictitious Name	Foreign Comparison Limited Partnership
		REGISTRATION/QUALIFICATION Foreign Limited Partnership Reinstatement Trademark Other

Examiner's Initials

Florida Department of State, Jim Smith, Secretary of State

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, the undersigned corporation organized under the laws of the State Florida submits the following statement in order to change its registered of or registered agent, or both, in the State of Florida.	of fice
1a. The name of the corporation is: SIIK, INC.	<u> </u>
1b. Date of incorporation June 10, 1994 Document number PSAROOCES	<u>690</u>
2. The name and address of the current registered agent and office: James S Olin James S Olin	
35000 Emerald Coast Pkwy, Destin, FL 32541	
3. The name and address of the new registered agent and office: (P.O. Box Not Acceptable) C T CORPORATION SYSTEM	
C/O C T CORPORATION SYSTEM, 1200 South Pine Island Rd., Plantation Florida	<u>33</u> 324
The street address of its registered agent and the street address of the business off of its registered agent as changed will be identical.	
Such change was authorized by resolution duly adopted by its board of directors or to an officer se authorized by the board. ON)y Seri
HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNAT IN THIS CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPL WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATION OF MY POSITION AS REGISTERED AGENT. C T CORPORATION SYSTEM SIGNATURE BY: John J Linnihan, Asst VP (Registered Agent) DATE DATE	Y OM-
Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314	 ļ

Filing Fee: \$35.00

(FLA: -2194 - 3/4/92)

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