

P96000091594

Requestor's Name



CHARLES L. BELOTE & ASSOCIATES, P.A.
CERTIFIED PUBLIC ACCOUNTANTS

445 North Causeway
New Smyrna Beach, Florida 32169

Use Only

):

1. _____ (Corporation Name) (Document #) **500002233815--1**
-07/09/97--01060--022
2. _____ (Corporation Name) (Document #) *******35.00 *****35.00**
3. _____ (Corporation Name) (Document #)
4. _____ (Corporation Name) (Document #)

- ☐ Walk in ☐ Pick up time _____ ☐ Certified Copy
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of _____

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input checked="" type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

FILED
97 JUN 30 AM 8:28
RECEIVED
97 JUN 30 AM 8:07
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

Doc 7/8

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 of Florida submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation is: Dragon Ryders, Inc.
2. The mailing address of the corporation is: 419 Hagler Avenue
New Smyrna Bch, FL 32169
3. Date of incorporation/qualification: 11/7/96 Document number: P96000091594
4. The name and address of the current registered agent and office:

Amerilawyers
P.O. Box 144479 - 343 America Ave.
Coral Gables, FL 33114-4479

5. The name and address of the new registered agent and office: (P.O. Box Not Acceptable)

Shauna Monahan
419 Hagler Avenue
New Smyrna Bch, FL 32169

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.

x Shauna Monahan
(Signature of an officer, chairman or vice chairman of the board)

6/23/97
(Date)

SHAUNA MONAHAN, V.P.
(Printed or typed name and title)

Having been named as registered agent and to accept service of process for the above stated corporation, 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.

x Shauna Monahan
(Signature of Registered Agent)

6/23/97
(Date)

If signing on behalf of an entity:

(Typed or Printed Name)

(Capacity)