P98000052092

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone	e #)
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09/29/14--01004--024 **35.00



10/2/14

COVER LETTER

TO: Amendment Section

Division of Corporations

SUBJECT: SSA Properties, Inc.

Name of Corporation

P98000052092

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:

Jerry G. Albert

Name of Contact Person

SSA Properties, Inc.

Firm/Company

13846 Atlantic Blvd., #801

Address

Jacksonville, Florida 32225

City/State and Zip Code

mismarki@comcast.net

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

For further information concerning this matter, please call:

Jerry G. Albert

,,904

612-6120

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 chan	rovisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this ge is submitted for a corporation organized under the laws of the State of FLorida
	to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the	e corporation: SSA Properties, Inc.
2. The principal o	ffice address: 13846 Atlantic Blvd., #801, Jacksonville, Florida 32225
3. The mailing ad-	dress (if different):
4. Date of incorpo	oration/qualification: 06/08/1998 Document number: P98000052092
	street address of the current registered agent and registered office on file with the ment of State: (If resigned, enter resigned)
(Cheryl Summers
2	2030-2 Southside Blvd.
	Jacksonville, Florida 32216
6. The name and s (if changed):	2030-2 Southside Blvd. Jacksonville, Florida 32216 street address of the new registered agent (if changed) and /or registered office. Jerry G. Albert Jak46 Atlantic Blvd., #801
<u>.</u>	Jerry G. Albert
_1	13846 Atlantic Blvd., #801
	P.O. Box NOT acceptable Jacksonville, Florida 32225
-	· · · · · · · · · · · · · · · · · · ·
The street address as changed will b	s of its registered office and the street address of the business office of its registered agent, e identical.
1	authorized by resolution duly adopted by its board of directors or by an officer so board, or the corporation has been notified in writing of the change.
Signature	JERRY G., Albert TREASURER of an officer or director Printed or typed name and title
I hereby accept th I further agree to performance of m agent. Or, if this hereby confirm th	he appointment as registered agent and agree to act in this capacity. comply with the provisions of all statutes relative to the proper and complete by duties, and I am familiar with and accept the obligation of my position as registered document is being filed merely to reflect a change in the registered office address, I that the corporation has been notified in writing of this change.
Signa	09-24-2014 Date Date
If signing on beha	alf of an entity:
Тур	ed or Printed Name

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 * * *