P98000103389

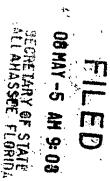
No leturn Adduss				
(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
· 				
Special Instructions to Filing Officer:				





000128485110

05/05/08--01078--003 ++35.00



(12 2/2m

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617 statement of change is submitted for a corporation o			
in order to change its registered office or re	gistered agent, or both	in the State of Florida	a.
1. The name of the corporation:	Docksbu	Seamast	er, Inc.
2. The principal office address: 215	isly Koa	<u>a</u>	
3. The mailing address (if different):	ox 949	Ruskin, 1	FQ.3355
4. Date of incorporation/qualification: 12/98	Document nu	ımber: <u>P98000</u>	0103389
5. The name and street address of the current register Florida Department of State:	red agent and registered	office on file with the	;
Fouler Whi	te, Banks	Bogs	A
Tampa, F.	2.		MAY -5
6. The name and street address of the new registered (if changed):	agent (if changed) and	/or registered office	
Joseph PVa	lh		
215 LLISEY	Road	·	K. J. J.
Apollo Beac	h FQ 33	3572	-
The street address of its registered office and the s as changed will be identical.	treet address of the bus	siness office of its reg	sistered agent,
Such change was authorized by resolution duly ad authorized by the board, or the corporation has been	opted by its board of d en notified in writing o	irectors or by an office of the change.	cer so
(Signature of an one-or director)	x. John	L. Valh S	r.
I hereby accept the appointment as registered age I further agree to comply with the provisions of all of my duties, and I am familiar with and accept the document is being filed merely to reflect a change corporation has been notified in writing of this ch	nt and agree to act in i I statutes relative to the e obligation of my posi in the registered office ange.	this capacity. e proper and complet ition as registered ag e address, I hereby co	e performance ent. Or, if this infirm that the
(Signature of Registered Agent)	00	4/29/08	
If signing on behalf of an entity:	•		
Joseph P Valh (Typed or Printed Name)			

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