## P99000021305

(Req	uestor's Name)			
(5.4.3)				
(Add	ress)			
(Address)				
·				
(City/State/Zip/Phone #)				
PICK-UP	MAIT	MAIL		
(Busi	iness Entity Nam	ne)		
(Document Number)				
·	-			
Certified Copies	Certificates	of Status		
Special Instructions to Filing Officer:				

Office Use Only



200030465292

03/17/04--01058--023 \*\*35.00



3/22

## TRANSMITTAL LETTER

SUBJECT: Siumberland Holdings Company	***
(Name of corporation)	
DOCUMENT NUMBER: P99000021305	y. <sup>2</sup> #
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:	
Judith A. Howard	
(Name of person)	
Slumberland Holdings Company	
(Name of firm/company)	
1477 S. Ft. Harrison Ave	
(Address)	
Clearwater/FL 33756	
(City/state and zip code)	<del></del>
For further information concerning this matter, please call:	
Judith A. Howard  at (727 ) 442-8993  (Name of person) (Area code & daytime telephone nu	The state of the s
(Name of person) (Area code & daytime telephone no	imber)
Enclosed is a \$35.00 check made payable to the Department of State.	
Mailing Address:Street Address:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327409 E. Gaines Street	

4.65

CR2E045(09/03)

Amendment Section

TO:

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

	provisions of sections 607.0502, 617.0502, 6		this statement of
change 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.			in order
to change its re	gisterea office or registerea agent, or both, ti	n the State of Florida.	
1. The name of	the corporation: Slumberland Holdings Cor	mpany	·
2. The principal	office address: 1477 S. Ft. Harrison Ave, C	Clearwater, FL 33756	
3. The mailing	address (if different):		
		The second secon	
4. Date of incor	poration/qualification: 03/04/99	Document number: P99000021305	<u> </u>
	d street address of the current registered agen rtment of State:	at and registered office on file with the	
	Joseph M. Silcox	<u> </u>	<u>.                                    </u>
	1477 S. Ft. Harrison Ave		
	Clearwater/FL 33756		Ese of m
6. The name and (if changed):	d street address of the new registered agent (i		RETARY
	Judith A. Howard		
	1477 S. Ft. Harrison Ave		- Karana - K
	(P.O. Box or personal mail	box NOT acceptable)	
	Clearwater/FL 33756		
The street addr changed will be	ess of its registered office and the street add e identical.	dress of the business office of its registe	ered agent, as
Such change w the board, or th	as authorized by resolution duly adopted be the corporation has been notified in writing of	y its board of directors or by an officer of the change.	so authorized by
- Gud	Signature of an officer or director)	Judith A. Howard, Director (Printed or typed name and to	uile)
I hereby accept I further agree duties, and I ar being filed mer been notified in	t the appointment as registered agent and a to comply with the provisions of all statute n familiar with and accept the obligation o ely to reflect a change in the registered offi n writing of this change.	igree to act in this capacity s relative to the proper and complete pi f my position as registered agent. Or, i ice address, I hereby confirm that the co	erformance of my f this document is orporation has
Jud	(Signature of Registered Agent)	3-15-04 (Date)	
If signing on be	ehalf of an entity:	, <u>-</u>	
_ Judi	· il	Dicactae	
	(Typed or Printed Name)	(Capacity)	