P9900021967

(Re	questor's Name)			
(Ad	dress)			
(Ad	dress)			
(City/State/Zip/Phone #)				
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SECRETARY OF STATE
TALLAHASSEE FLORIC



COVER LETTER

TO:	Amendment Section Division of Corporations		
SUBJ	ЕСТ:_Aquarina Sales, Inc. (Name of С	orporation)	
DOC	UMENT NUMBER: P99000021967		
The e	nclosed Statement of Change of Registered Office	e/Agent and fee are submitted for filing.	
Please	return all correspondence concerning this matter	to the following:	
James H. Bates (Name of Contact Person)			
	(Name of Cor	mact reison)	
	Aquarina	s Sales Inc	
Aquarina Sales, Inc. (Firm/Company)			
P.O. Box 1329			
	(Add	ress)	
		·	
Melbourne, Fl. 32902-1329 (City/State and Zip Code)			
F 6	•		
For fi	orther information concerning this matter, please of	call:	
	James H. Bates	at (321) 480-1336 (Area Code & Daytime Telephone Number)	
	(Name of Contact Person)	(Area Code & Daytime Telephone Number)	
Enclo	sed is a \$35.00 check made payable to the Depar	tment of State.	
	Mailing Address:	Street Address:	
	Mailing Address: Amendment Section	Amendment Section	
	Division of Corporations	Division of Corporations	
	P.O. Box 6327 Tallahassee, FL 32314	Clifton Building 2661 Executive Center Circle	
	rananassee, i L 52514	Tallahassee, FL 32301	

TO:

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 statement of change is submitted for a corporation organized under the laws of the State of in order to change its registered office or registered agent, or both, in the State of	<u>Florida</u>	
1. The name of the corporation: Aquarina Sales, Inc.	· · · · · · · · · · · · · · · · · · ·	
. The principal office address: 304 Beaujean Ave. Melbourne Beach, Fl. 32951		
3. The mailing address (if different): P. O. Box 1329 Melbourne, Fl. 32902-132	9	
4. Date of incorporation/qualification: 3/5/1999 Document number: P9900	00021967	
5. The name and street address of the current registered agent and registered office on file v Florida Department of State: (If resigned, enter resigned)	vith the	
James H. Bates	_	
270 Hammock Shore Dr.		
Melbourne Beach, Fl. 32951	09 SEL TALL	
6. The name and street address of the new registered agent (if changed) and /or registered of (if changed):	FILE APR 30 CRETARY 0 ABASSEE	
304 Beaujean Ave.		
(P.O. Box NOT acceptable)	1: 53 	
Melbourne Beach, Fl. 32951	_	
The street address of its registered office and the street address of the business office of as changed will be identical.	its registered agent,	
Such change was authorized by resolution duly adopted by its board of directors or by a authorized by the board, or the corporation has been notified in writing of the change.	an officer so	
(Signature of an officer or director) James H. Bates, (Printed or typed name an	1 100,40111	
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 comp duties, and I am familiar with and accept the obligation of my position as registe document is being filed merely to reflect a change in the registered office address, I here corporation has been polified in writing of this change.	omplete performance red agent. Or, if this eby confirm that the	
(Signature of Registered Agent) 4/27/09 (Date)		
If signing on behalf of an entity:		
(Typed or Printed Name)		