P9000083038

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TRANSMITTAL LETTER	7. CO	
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TO: Amendment Section Division of Corporations	影 2	
Division of Corporations	SSE	
SUBJECT: SLS MILLENIUM INC.	03 NOV 21 PH 1: 53	
SUBJECT: SLS MILLENIUM, INC. (Name of corporation)	977 0	
DOCUMENT NUMBER: P99000083038	Dr.	
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:		
(Name of person)		
(Name of person)	•	
•		
SLS MILLEUIUM, TNC. (Name of firm/company)		
(Name of Hrm/company)		
C/O PROPERTY MANAGER 2020 SE 21ST COURT (Address)		
(Address)		
CAPE CORAL, FL 33990 (City/state and zip code)) 	
For further information concerning this matter, please call:		
(Name of person) (Name of person) (Area code & daytime telep	4503	
(Maile of person) (Mea code & daytime tote)	pitotic flumber)	
Enclosed is a \$35.00 check made payable to the Department of State.		
Mailing Address: Amendment Section Street Address: Amendment Section		
Division of Corporations Division of Corporations		
P.O. Box 6327 Tallahassee, FL 32314 409 E. Gaines Street Tallahassee, FL 32399		

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, this statement of
change is submitted for a corporation organized under the i	laws of the State ofFLORIDA in order
to change its registered office or registered agent, or both, i	in the State of Florida.
1. The name of the corporation: SLS mu	LLENIUM, TNC.
2. The principal office address: 20.20 SE	DIST COURT
CADE CORAL	FC 33996
3. The mailing address (if different):	DERTY MANAGER
2014 SE 2	UST COURT, CAPE CORAL, FL 33990
4. Date of incorporation/qualification: 9-13-1999	7 Document number: <u>P99000083038</u>
5. The name and street address of the current registered ages Florida Department of State:	nt and registered office on file with the
CHRUCAG	LINI DENISE 39 3
CIPPE CORA	L SUN VACATIONS ON
	PRADO BLVO. S
CAPE COR	AL, FL 33904 SEC 20
6. The name and street address of the new registered agent (if changed):	if changed) and /or registered office
GUNOY,	GREGORY S.
2020 SE 21ST C	OURT
(P.O. Box or personal mai	Ibox NOT acceptable)
CAPE COR	4L, FL 33990
The street address of its registered office and the street adchanged will be identical.	dress of the business office of its registered agent, as
Such change was authorized by resolution duly adopted the board, or the corporation has been notified in writing	by its board of directors or by an officer so authorized by of the change.
× / / / /	KARL LORENZ JANTSCHI
(Signature of an officer or director)	(Printed or typed name and title)
I hereby accept the appointment as registered agent and a further agree to comply with the provisions of all statute duties, and I am familiar with and accept the obligation of being filed merely to reflect a change in the registered off been notified in writing of this change.	agree to uct in this capacity; es relative to the proper and complete performance of my of my position as registered agent. Or, if this document is lice address, I hereby confirm that the corporation has
March -	11-07-2003
(Signature of Registered Agent)	(Date)
If signing on behalf of an entity:	
GREG GUNOY	NEW AGENT
(Typed or Printed Name)	(Capacity)

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