## 538470

(Re	questor's Name)	<del></del>		
(Ad	dress)			
(Ad	dress)			
(Cit	y/State/Zip/Phon	e #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
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R.A. Change

## **COVER LETTER**

TO:	Amendment Section Division of Corporations		
SUBJ	IECT: Astrosource Services, Inc.		
	(Name of Corp	oration)	
DOC	UMENT NUMBER: S38470		
The er	nclosed Statement of Change of Registered Office/A	gent and fee are submitted for filing.	
Please	e return all correspondence concerning this matter to	the following:	
		C	
	Frank A. Ruisi		
	(Name of Contact	et Person)	
Astrosource Services, Inc.			
	(Firm/Comp	oany)	
	. Add O. I. in important Depart		
	1128 Livingston Road (Address		
	(rtddress	"	
	Lutz, Florida 33559		
	(City/State and 2	Zip Code)	
For fu	orther information concerning this matter, please call:	:	
Frank	c A. Ruisi	or ( 813 ) 949-8198	
	(Name of Contact Person)	at (813 ) 949-8198 (Area Code & Daytime Telephone Number)	
Enclos	sed is a \$35.00 check made payable to the Departme	nt of State.	
	Mailing Address: Amendment Section	Street Address: Amendment Section	
	Amendment Section Division of Corporations		
	P.O. Box 6327	Division of Corporations Clifton Building	
	Tallahassee, FL 32314	2661 Executive Center Circle	
		Tallahassee, FL 32301	

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

Pursuant to the provisions of sections 607.0502, 617.0 statement of change is submitted for a corporation org in order to change its registered office or regi	anized under the laws of the State	of Florida
1. The name of the corporation: Astrosource Services,		
2. The principal office address: 6955 Coronet Drive N		,
3. The mailing address (if different):		
4. Date of incorporation/qualification: 3/14/91	Document number: S38	470
5. The name and street address of the current registered Florida Department of State:	dagent and registered office on fil	e with the
Mary L. Frank		
6955 Coronet Drive		
New Port Richey, FL 34655		2008 FF
6. The name and street address of the new registered ag (if changed):	gent (if changed) and /or registered	
Frank A. Ruisi		
1128 Livingston Road		PH 1: 36  OF STATE EE. FLORI
(P.O. Box NOT acceptal	ble)	36 
Lutz, Florida 33559	-····	<del></del>
The street address of its registered office and the street as changed will be identical.		
Such change was authorized by resolution duly adop authorized by the board, or the corporation has been	ted by its board of directors or b notified in writing of the change	y an officer so
(Signature of an Object of director)	Frank A. Ruisi Presid	dent - Director
I bereby accept the appointment as registered agent of further agree to comply with the provisions of all stone of my duties, and I am familiar with and accept the odd document is being filed merely to reflect a change in corporation has been notified in writing of this change	and agree to act in this capacity atutes relative to the proper and bligation of my position as regis the registered office address. I	•
( m	January 31, 2008	
(Signature of Registered Agent)	(Date)	
If signing on behalf of an entity:		
(Typed or Printed Name)	FEE: \$35.00 * * *	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314