## V154949

(Requestor's Name)
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PICK-UP WAIT MAIL
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## **COVER LETTER**

TO: Amendment Section Division of Corporations
SUBJECT: Southern Crane & Dragline Service, INC. (Name of Corporation)
DOCUMENT NUMBER: V 54969
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:
Sherry or Robert G Edwards (Name of Contact Person)
Southern Crane + Dragline Service, Inc
16200 Bay Pointe BLvil A-201 (Address)
North Fort myers Fl. 33917 (City/State and Zip Code)
For further information concerning this matter, please call:
Sherry Edwards at (340)514 5395 (Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed is a \$35.00 check made payable to the Department of State.
Mailing Address: Amendment Section  Street Address: Amendment Section

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

## 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 laws of the State of Florida.  in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: Southern Crave & Dragline Service, Inc.
2. The principal office address: 16200 Bay Pointe Blud
North Fort myers, Fl. 33917 A.201
3. The mailing address (if different): P.O.Box 3 440
Fort myers, Florida 33918
4. Date of incorporation/qualification: 07/30/199 Document number: V 54969
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
ALL Florida Firm, ±Nc.
465 S. Volusia Ave Suite C Za
1112A "
Orange City Florida 32763  6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Robert G Edwards
16200 Bay Pointe Blvd A 201
North Fort myers, Florida 33917
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.
Sherry L. Edwards VicePresident (Signature of an officer or director)  Sherry L. Edwards VicePresident (Printed or typed name and title)
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 complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.
(Signature of Registered Agent) (Date)
If signing on behalf of an entity:
Robert G. Edwards Sr. (Typed or Printed Name)

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