

706000001891

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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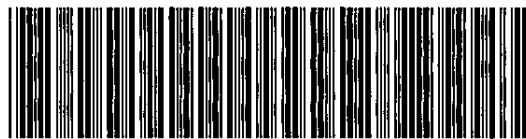
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DEC 17 2014
T. J. GRIFFIN

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Indian Rocks Mobile Home Cooperative, Inc.
Name of Corporation

DOCUMENT NUMBER: N06000001891

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:

Leon F. Hansen, CPA

Name of Contact Person

Corporation Partnership & LLC Advisors, Inc.

Firm/Company

PO Box 1264

Address

Winter Haven, FL 33882

City/State and Zip Code

leon_f_hansen_cpa@yahoo.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Leon F. Hansen, CPA

Name of Contact Person

at (712) 216-3333
Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Amendment Section
Division of Corporations
Clifton Building
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, 617.0502, 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 US in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Indian Rocks Mobile Home Cooperative, Inc.
2. The principal office address: 12701 126th Ave. N. Lot 241
Largo, Florida 33774
3. The mailing address (if different): _____

4. Date of incorporation/qualification: 02/20/2006 Document number: N06000001891

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

Bryan K. McLachlan

12701 126th Ave. North #241

Largo, FL 33774 US

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Corporation Partnership & LLC Advisors, Inc.

6753 Chianina St

P.O. Box NOT acceptable

Lake Wales, FL 33859

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.

Sharon Russ
Signature of an officer or director

Sharon Russ, Treasurer

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.

Leon Hansen
Signature of Registered Agent

December 1, 2014

Date

If signing on behalf of an entity:

Leon F. Hansen

Typed or Printed Name

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (03/12)

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