

P07000127959

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

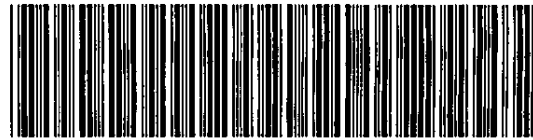
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200292315762

11/21/16--01007--020 **35.00

FILED
2016 NOV 21 PM 1:17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

11/29/16

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Stage Rigging Services of Florida, Inc
Name of Corporation

DOCUMENT NUMBER: PD7000 127959

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:

Les Martin
Name of Contact Person

Stage Rigging Services of Florida, Inc
Firm/Company

867 Huffman St.
Address

Greensboro, NC 27405
City/State and Zip Code

lmartin@srrigging.us
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Les Martin at (336) 370-1900
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
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 in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Stage Rigging Services of Florida, Inc
2. The principal office address: 867 Huffman Street
Greensboro, NC 27405
3. The mailing address (if different): Same
4. Date of incorporation/qualification: 11/30/2007 Document number: P07000127959

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)

Les Martin
867 Huffman St.
Greensboro, NC 27405

FILED
2016 NOV 21 PM 1:17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

Dick Bryan
207 N.W. 1st Ave
P.O. Box NOT acceptable
Mulberry, FL 33860

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.

Les Martin
Signature of an officer or director

Les Martin: President
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.

Dick Bryan
Signature of Registered Agent

11/11/2016
Date

If signing on behalf of an entity:

Dick Bryan
Typed or Printed Name

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