

V 19374

Timothy J. Warfel

Requester's Name

2015 Centre Pointe Blvd. Ste 105

Address

Tallahassee, FL 32308 942-1919

City/State/Zip

Phone #

FILED  
01 JUN 29 PM 3:44  
SECRETARIAT OF STATE  
TALLAHASSEE, FLORIDA

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. Sullivan Pine Straw, Inc V19374  
(Corporation Name) (Document #)

2. \_\_\_\_\_  
(Corporation Name) (Document #)

3. \_\_\_\_\_  
(Corporation Name) (Document #)

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-07/02/01--01001--012  
\*\*\*\*\*35.00 \*\*\*\*\*35.00

4. \_\_\_\_\_  
(Corporation Name) (Document #)

- Walk in
- Pick up time
- Certified Copy
- Mail out
- Will wait
- Photocopy
- Certificate of Status

NEW FILINGS

- Profit
- Not for Profit
- Limited Liability
- Domestication
- Other

no change  
7-2-01  
PHS

AMENDMENTS

- Amendment
- Resignation of R.A., Officer/Director
- Change of Registered Agent
- Dissolution/Withdrawal
- Merger

NOT INTENDED  
TO ACKNOWLEDGE  
EFFICIENCY OF FILING

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OTHER FILINGS

- Annual Report
- Fictitious Name

REGISTRATION/QUALIFICATION

- Foreign
- Limited Partnership
- Reinstatement
- Trademark
- Other

Examiner's Initials

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

*Pursuant to the provisions of sections 607.0602, 617.0502, 067.1508, or 617.1508, Florida Statutes, the undersigned corporation organized under the laws of the State of Florida Submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.*

1. The name of the corporation: **Sullivan Pine Straw, Inc.**
2. The mailing address of the corporation: **Route 2 Box <sup>190</sup>22, Mayo, Florida, 32066**
3. Date of incorporation/qualification: **03/06/1992** Document number: **V19374**

4. The name and address of the current registered agent and office:

**Timothy J. Warfel**  
**215 South Monroe Street, Suite 701**  
**Tallahassee, Florida 32301**

5. The name and address of the new registered agent (if changed) and/or registered office (if changed) (P.O. Box Not Acceptable)

Timothy J. Warfel  
2015 Centee Pointe Blvd.  
Tallahassee, FL 32308

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**TALLAHASSEE FLORIDA**

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.

Deborah J. Sullivan Sec.  
(Signature of an officer, chairman or vice chairman of the board)

6-27-01  
(Date)

If signing on behalf of an entity:

SULLIVAN PINE STRAW, INC.

(Typed or Printed Name)

(Capacity)

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

CR2E045(9/00)

DIVISION OF CORPORATIONS

P.O. BOX 6327

TALLAHASSEE, FLORIDA, 32314