374329

	•	
(Re	equestor's Name)	
(Ad	ldress)	
. (Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
		·

Office Use Only



900079934979

09/22/06--01016--004 **35.00

OG SEP 22 AM 8: 59
LLAHASSEE, FLORIDA

COVER LETTER

Amendment Section

TO:

Division of Corporations					
SUBJECT: Ernie Haire Ford, Inc. (Name of Corporation)					
(· ··································					
DOCUMENT NUMBER: 374329					
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:					
Ernest B. Haire, III					
(Name of Contact Person)					
Ernie Haire Ford, Inc. (Firm/Company)					
(Firm/Company)					
9545 N. Florida Avenue					
(Address)					
Tampa, FL 33612					
(City/State and Zip Code)					
For further information concerning this matter, please call:					
5					
Ernest B. Haire, III at (813) 933-7632 (Name of Contact Person) (Area Code & Daytime Telephone Number)					
(Name of Contact Ferson) (Area Code & Daytime Felephone Number)					
Enclosed is a \$35.00 check made payable to the Department of State.					
•					
Mailing Address: Street Address:					
Mailing Address: Amendment Section Street Address: Amendment Section					
Division of Corporations Division of Corporations					
P.O. Box 6327 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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Floi ange is submitted for a corporation organized under the laws of the State er to change its registered office or registered agent, or both, in the State	e of Florida		
1. The name of	the corporation: Ernie Haire Ford, Inc.			
	office address: 9545 N. Florida Avenue, Tampa, FL 33612			
3. The mailing a	address (if different):			
4. Date of incor	poration/qualification: 12/21/70 Document number: 374	1329		
	d street address of the current registered agent and registered office on fil rtment of State:	le with the		
	Lindell F. Shrum, II			
	9545 N. Florida Avenue, Tampa, FL 33612			
		TAL SE	90	
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registere	ASS ASS	SEP	eneccia de la companya de la company
	Geoffrey Todd Hodges, Esq.			
	9545 N. Florida Avenue, Tampa, FL 33612 (P.O. Box NOT acceptable)	LORIDA 	8: 59	
as changed will		-	_	ent,
Such change was authorized by the	as authorized by resolution duly adopted by its board of directors or the board, or the corporation has been notified in writing of the change	y an officer	so	
- Est Signation	Ernest B. Haire, III, P			
I further agree of my duties, an document is bei	the appointment as registered agent and agree to act in this capacity to comply with the provisions of all statutes relative to the proper and all am familiar with and accept the obligation of my position as registing filed merely to reflect a change in the registered office address, I is been notified in writing of this change.	, I complete p stered agent hereby confi	erforma Or, if rm that	ince this the
Was	September 5, 2006			
	chalf of an entity: (Date)			
	Evred or Printed Name)			

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