383528

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ry/State/Zip/Phone	· #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	ocument Number)	······································
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COVER LETTER

TO: Amendment Section Division of Corporations		
SUBJECT: Coastine Vending, Inc. Name of Corporation		
DOCUMENT NUMBER:383528		
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:		
Patricia Noble Name of Contact Person		
COASTLINE VENDING, INC		
4221 NE 27th Ave		
Lighthorse Point, FC 33064 City/State and Zip Code		
E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call:		
Patricia Noble at (954) 942 4957 Name of Contact Person Area Code & Daytime Telephone Number		
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: Coastine Vending, Inc.
2. The principal office address: 4221 NE 27th Ave
Lighthorse Point, FL 33064
3. The mailing address (if different):
4. Date of incorporation/qualification: 697 Document number: 38 3528
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)
Richard Noble
4221 NE 27th Are
Lighthouse Point FL 33064 = 50
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Patricia Noble
1221 NE 27th Ave P.O. Box NOT acceptable Lighthouse Point, FL 33064
Lighthouse Point, FC 33064
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.
Patricia Noble - 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.
Patricia Noble 9-3-2013 Signature of Registered Agent Date
If signing on behalf of an entity:
Typed or Printed Name
VI

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

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