

545041

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

B.A.

TB

JUN 10 2010

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: BOTTOMLEY ENTERPRISES, INC.
Name of Corporation

DOCUMENT NUMBER: 545041

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:

Jerry Markowitz
Name of Contact Person

Markowitz, Davis, Ringel, & Trusty P.A.
Firm/Company

Two Dattran Center, Suite 1225
Address

9130 South Dadeland Blvd.

Miami, FL 33156-7849
City/State and Zip Code

jmarkowitz@mdr-tlaw.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jerry Markowitz at (305) 670-5000
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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 1, 2010

JERRY MARKOWITZ
MARKOWITZ, DAVIS, RINGEL & TRUSTY P.A.
9130 S DADELAND BLVD STE 1225
MIAMI, FL 33156-7849

SUBJECT: BOTTOMLEY ENTERPRISES, INC.
Ref. Number: 545041

We have received your document for BOTTOMLEY ENTERPRISES, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6925.

Teresa Brown
Regulatory Specialist II

Letter Number: 110A00013594

**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: BOTTOMLEY ENTERPRISES, INC.
2. The principal office address: 18121 HWY 70 N
MONTEREY TN 38574
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 09/13/1977 Document number: 545041
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)

MIAMI CENTER REGISTERED AGENTS, LLC
201 S. BISCAYNE BOULEVARD SUITE 1700
MIAMI FL 33131 RESIGNED

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

Markowitz, Davis, Kingel, & Trusty, P.A.
Two Datran Center, Suite 1225
9130 South Dadeland Blvd.
P.O. Box NOT acceptable
Miami, FL 33156-7849

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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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.

Donald K. Bottomley
Signature of an officer or director

DONALD K. BOTTOMLEY PD
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.

[Signature]
Signature of Registered Agent

6/4/2010
Date

If signing on behalf of an entity:

IDO ALEXANDER
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 (8/05)