5617a4

(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
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(Bu	siness Entity Nar	ne)
(Do	cument Number)	
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TALLAHASSEE ESTATE

SEP 11 2013

COVER LETTER

Division of Corporations
SUBJECT: LORING E. "SNAG" HOLMES, INC. Name of Corporation
DOCUMENT NUMBER: 561724
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:
CINDY S. POTTER
Name of Contact Person
LORING E."SNAG" HOLMES, INC.
Firm/Company
950 MARLIN CIRCLE
Address
JUPITER, FL 33458
City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
CINDY POTTER at (541) 262-3512 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

TO:

Amendment Section

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, Florida Statutes ange is submitted for a corporation organized under the laws of the State of FLOIRD)A		
	r to change its registered office or registered agent, or both, in the State of Florida.			
1. The name of	the corporation: LORING E. "SNAG" HOLMES, INC.			
	office address: 950 MARLIN CIRCLE 5, FL 33458			
3. The mailing a	address (if different):			
4. Date of incor	poration/qualification: 02/20/1978			
	d street address of the current registered agent and registered office on file with the rtment of State: (If resigned, enter resigned)			
	BROEDELL, JOSEPH F			
	357 CYPRESS DRIVE, SUITE 11		5 .	
	TEQUESTA, FL 33469	AFFR AllG 30 CRETAR: LAHASS		
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered office	RETARY OF ST AHASSEE, FLO		
	POTTER, CINDY S	TATE ORIO	ა	
	950 MARLIN CIRCLE	≯	•	
	P.O. Box NOT acceptable JUPITER, FL 33469			
The street address changed will	ess of its registered office and the street address of the business office of its registibe identical.	ered agent,		
	as authorized by resolution duly adopted by its board of directors or by an officer ne board, or the corporation has been notified in writing of the change.	so	est. eedoa t	
Signatu	may atta Cindy Stotter Printed of typed name and title	BRO	ædost	
I hereby accept I further agree performance of agent. Or, if th hereby confirm	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 complete my duties, and I am familiar with and accept the obligation of my position as reg is document is being filed merely to reflect a change in the registered office addre that the corporation has been notified in writing of this change.	istered ess, I		
Sig	mature of Registered Agent 8-20-2013 Date			
If signing on be	half of an entity:			
CINDY S. F	POTTER			

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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

CR2E045 (03/12)

Typed or Printed Name