

596527

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

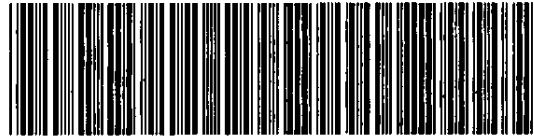
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2010 MAY 10 A 10:26
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RA Charge
Revised

5-12-10

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Bonded Lightning Protection Systems, Inc.
Name of Corporation

DOCUMENT NUMBER: 596527

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:

Patrick Dillon
Name of Contact Person

Bonded Lightning Protection Systems, Inc.
Firm/Company

2080 W. Indiantown Rd., Suite 100
Address

Jupiter, FL 33458
City/State and Zip Code

pat @ bonded lightning. com
E-mail address: (to be used for future annual report notification)

RECEIVED
2010 MAY 10 AM 8:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Patrick Dillon at (561) 746-4336
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

Sent
Check #
21193
Separate by
mistake. Please
call if there is an
issue.
Thanks!

**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: Bonded Lightning Protection Systems, Inc.
2. The principal office address: 2080 W. Indian town Rd, Suite 100
Jupiter, FL 33458
3. The mailing address (if different): PO Box 9006
Jupiter, FL 33468
4. Date of incorporation/qualification: 5/1/1973 Document number: _____
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)

Diane Dillon
17752 121st Terrace N.
Jupiter, FL 33478

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

Patrick Dillon
2080 W. Indian town Rd., Suite 100
Jupiter, FL 33458

P.O. Box NOT acceptable

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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, or the corporation has been notified in writing of the change.

Diane Dillon, Pres.
Signature of an officer or director

Diane Dillon, 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.

[Signature]
Signature of Registered Agent

5-16-10
Date

If signing on behalf of an entity:

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)