

614361

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
2005 NOV 10 PM 12:32

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

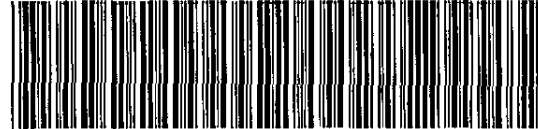
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100061203221

11/10/05--01014--001 **35.00

RA Address Chg.

11/5
11/14

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: MIAMI CRANE SERVICE, INC.
(Name of Corporation)

DOCUMENT NUMBER: 614361

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:

Roby Erding
(Name of Contact Person)

MIAMI CRANE SERVICE, INC.
(Firm/Company)

16201 E. TROON Circle
(Address)

MIAMI LAKES, FL 33014
(City/State and Zip Code)

For further information concerning this matter, please call:

GINA GROSSMAN at (561) 239-2646
(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: MIAMI CRANE SERVICE, INC.
2. The principal office address: 10400 NW So. RIVER DR.
MEDLEY FL 33178
3. The mailing address (if different): 16201 E. TROON CIRCLE
MIAMI LAKES, FL 33014
4. Date of incorporation/qualification: 4/1/79 Document number: 614361
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

Roby Epling, JR.
10400 NW So. RIVER DR.
MEDLEY FL 33178

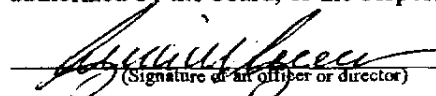
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Roby Epling JR.
16201 E. TROON CIRCLE
(P.O. Box NOT acceptable)
MIAMI LAKES FL 33014

→ ADDRESS
CHANGE ONLY


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.


(Signature of an officer or director)

GINA M. GROSSMAN - SEC.
(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 of Registered Agent)

11-6-05

(Date)

If signing on behalf of an entity:

Roby Epling JR.
(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

FILED
DIVISION OF CORPORATIONS
NOV 10 PM 2:32