

659583

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

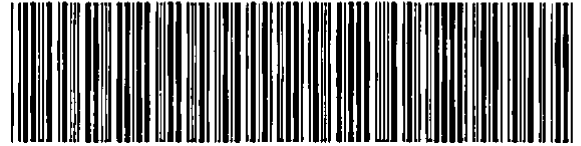
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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19 JUL 24 PM 6:00
TALAMON, J. H.

JUL 31 2019
S. YOUNG

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Gainesville Carpet & Flooring Inc
Name of Corporation

DOCUMENT NUMBER: 659583

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:

Stephen J Elder
Name of Contact Person

Gainesville Carpet & Flooring Inc
Firm/Company

6510 NW 13th Street
Address

Gainesville, FL 32653
City/State and Zip Code

josh@gainesvillecarpetsplus.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Josh Elder at (352) 378-2627
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: Gainesville Carpet & Flooring Inc
2. The principal office address: 6510 NW 13th Street
Gainesville, FL 32653
3. The mailing address (if different): _____

4. Date of incorporation/qualification: 03/18/1980 Document number: 659583

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)

Stephen C. Elder (Resigned)

116 Hunter Ave

Micanopy, FL 32667

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

Stephen J. Elder

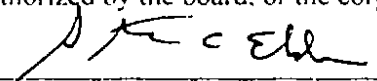
8413 SW 4th Place

P.O. Box NOT acceptable

Gainesville, FL 32607

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.

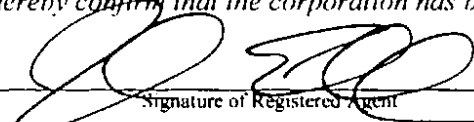


Signature of an officer or director

Stephen C Elder

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

07/09/19

Date

If signing on behalf of an entity:

Stephen J Elder

Typed or Printed Name

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