

FD5000004921

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(Business Entity Name)

(Document Number)

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SEALAND STATE
TALLAHASSEE, FLORIDA

C.M.
7/29/14

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Page Restoration Inc.
Name of Corporation

DOCUMENT NUMBER: _____

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:

Michael Page
Name of Contact Person

Page Corporation
Firm/Company

PO Box 780122
Address

Wichita, KS 67278
City/State and Zip Code

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

For further information concerning this matter, please call:

Racheal Page at (316) 262-7200
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

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STATE OF FLORIDA
TALLAHASSEE

**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 Kansas in order to change its registered office or registered agent, or both, in the State of Florida.


1. The name of the corporation: Page Restoration Inc.
2. The principal office address: 6333 SW Santa Fe Lake Rd
Augusta, KS 67010
3. The mailing address (if different): PO Box 780122
Wichita, KS 67278
4. Date of incorporation/qualification: 5/25/12 Document number: F05000004921
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)
Michael Page
1130 E. Donegan #4
Kissimmee, FL 34744

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


InCorp Services, Inc.
17888 67th Court North
P.O. Box NOT acceptable
Loxahatchee, FL 33470

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.

 Mike Page CEO
Signature of an officer or director 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.

 June 27, 2014
Signature of Registered Agent Date

If signing on behalf of an entity:

Heather Nee for InCorp Services Inc.
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
CR2F045 (05/12)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

14 JUL 14, AM 8:22

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