## F06000004212

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Outside the Fire Office
Special Instructions to Filing Officer:

Office Use Only



800251412298

09/18/13--01019--017 \*\*35.00

13 SEP 18 AM 10: 03
SECRETARY OF STATE
ALLAHASSEF, FLORIDA

C. LEWIS
SEP 2 5 2013
EXAMINER

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

SUBJECT: Change of Corporation Address

Name of Corporation

POGUMENT NUMBER: F06000004212

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:

Sam Arledge, President

Name of Contact Person

Industrial Products, Inc.

Firm/Company

12031 Canton Ave.

Address

Hudson, Florida 34669

City/State and Zip Code

sales@IndustrialMachineryService.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Sam Arledge

.813

944-2595

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

statement of cha	nge is submitted for a corporation	17.0502, 607.1508, or 617.1508, Florida a organized under the laws of the State of a registered agent, or both, in the State of I	Delaware	_
	the corporation: Industrial Pro			
2 The principal	office address: 12031 Canto	on Ave.		
	Hudson, Iori			
3. The mailing a	ddress (if different):			
4. Date of incorp	poration/qualification: 06/19/06	6 Document number: F0600	00004212	
	I street address of the current regis tment of State: (If resigned, enter	tered agent and registered office on file wresigned)	ith the	
	2107 Gunn Hwy, Suite	208		
Odessa, Florida 33556				
			13 S SEC	
6. The name and (if changed):	I street address of the new register	ed agent (if changed) and /or registered of		
	12031 Canton Ave.		AM IO: 0: E. FLORI	
	Odessa, Florida 34669			
	Р.О. В	lox NOT acceptable	<b>&gt;</b>	
The street addre	ess of its registered office and the be identical.	street address of the business office of it	s registered age	ent,
-		dopted by its board of directors or by an een notified in writing of the change.		
( ) am	- Cm	Sam Arledge, Presiden		
	re of an officer or director	Printed or typed name and tit	Te	_
I further garee 1	to comply with the provisions of a	ent and agree to act in this capacity. Ill statutes relative to the proper and con and accept the obligation of my position to reflect a change in the registered offic tified in writing of this change.	nplete n as registered ce address, I	
am	_ (	9/11/13		
Sign	nature of Registered Agent	Date		_
If signing on be	half of an entity:			
Sam Arledo				
Ty	ped or Printed Name			

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