

FO600006955

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS
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JUL 29 2015

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Broniec Associates Inc
(Name of Alien Business Organization)

Dear Sir or Madam:

The enclosed Statement of Change of Registered Agent/Registered Office for Alien Business Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Paul Broniec
(Name of Person)

Broniec Associates
(Firm/Company)

4855 Peachtree Industrial Blvd., Ste. 215
(Address)

Berkeley Lake, GA 30092
(City/State and Zip Code)

For further information concerning this matter, please call:

Paul Broniec at (770) 940-5014
(Name of Person) (Area Code & Daytime Telephone Number)

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

☐ \$35.00 Filing Fee

☒ \$43.75 Filing Fee & Certified Copy



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 30, 2015

PAUL BRONIEC / BRONIEC ASSOCIATES INC
4855 PEACHTREE INDUSTRIAL BLVD
SUITE 215
BERKELEY LAKE, GA 30092 US

SUBJECT: BRONIEC ASSOCIATES, INC.
Ref. Number: F06000006955

We have received your document for BRONIEC ASSOCIATES, INC. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a ALIEN BUSINESS ORGANIZATION, but your entity is a FOREIGN CORPORATION. Please complete and return the enclosed blank form(s).

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Carolyn Lewis
Regulatory Specialist II

Letter Number: 315A00013652

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

1. The name of the corporation: BRONIEC ASSOCIATES INC
2. The principal office address: 4855 Peachtree Ind. Blvd., Ste 215
Berkeley Lake, GA 30092
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 11-7-2006 Document number: F06000006955

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)

14709 7th Ave East
Bradenton, FL 34212

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

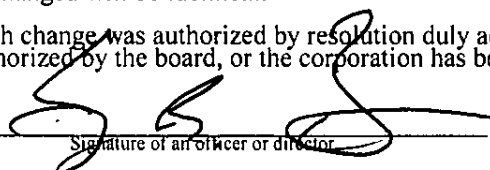
Pamela B. Ancil
5115 Savona Run
Bradenton, FL 34211

P.O. Box NOT acceptable

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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

Paul M. Broniec CFO

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.

Pamela Ancil

Signature of Registered Agent

7/21/2015

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 (03/12)