

F08000003078

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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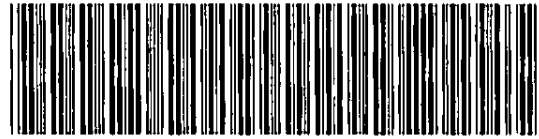
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FL 32310

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AUG 15 2017

I ALBRITTON

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: McGriff Tire Co., Inc.
Name of Corporation

DOCUMENT NUMBER: F08000003078

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:

Caryl Moon
Name of Contact Person

McGriff Tire Co., Inc.
Firm/Company

P.O. Box 1148
Address

Cullman, AL 35056
City/State and Zip Code

caryl.m@mcgrifftire.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jeff McGriff at (256) 739-0780
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 Alabama in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: McGriff Tire Co., Inc.
2. The principal office address: 86 Walnut Street
Cullman, AL 35055
3. The mailing address (if different): P.O. Box 1148
Cullman, AL 35056
4. Date of incorporation/qualification: 1-1-1968 Document number: F08000003078
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)

CT Corporation
1200 S Pine Island Rd #250
Plantation, FL 33324

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

Jeff Farris
1183 Grand Pointe Dr.
P.O. Box NOT acceptable
Gulf Breeze, FL 32563

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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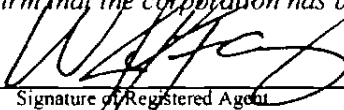
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

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

Jeff McGriff Sec/Treas
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

8/8/17
Date

If signing on behalf of an entity:

Typed or Printed Name

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