

Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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(((H130001613193)))



H130001613193ABCZ

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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : C T CORPORATION SYSTEM

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Fax Number : (850)878-5368

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Di1	Address:			

REGISTERED AGENT CHANGE ARTHUR MIDDLETON CAPITAL HOLDINGS, INC.

Certificate of Status	0
Certified Copy	0
Page Count	084
Estimated Charge	\$35.00

RE-SUBMIT Please relain original filing (13)

Electronic Filing Menu

Corporate Filing Menu GO SUDITISSION 7/18

850-617-6381 7/19/2013 12:07:38 PM PAGE 1/001 Fax Server



July 19, 2013

FLORIDA DEPARTMENT OF STATE

ARTHUR MIDDLETON CAPITAL HOLDINGS, INC. 8000 FREEDOM AVE CANTON, OH 44720

SUBJECT: ARTHUR MIDDLETON CAPITAL HOLDINGS, INC.

REF: F09000003089

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The above entity is a Florida corporation and the document is for a limited liability company. Please use the registered agent change form for a corporation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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

Darlene Connell Regulatory Specialist II FAX Aud. #: H13000161319 Letter Number: 413A00017596

RE-SUBMIT Please relain original filling date of submission 7/18

P.O BOX 6327 - Tallahassee, Florida 32314

COVER LETTER

TO:	Amendment Section Division of Corporations
SUBJE	Arthur Middleton Capital Holdings, Inc.
SUBJE	Name of Corporation
DOCU	F09000003089 MENT NUMBER:
The end	losed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please 1	eturn all correspondence concerning this matter to the following:
	Jenna Penrod
	Name of Contact Person
	Arthur Middleton Capital Holdings, Inc.
	Firm/Company
	8000 Freedom Avenue
	Address
	Canton, OH 44720
	City/State and Zip Code
	E-mail address: (to be used for future annual report notification)
For fur	her information concerning this matter, please call:
erika co	
	Name of Contact Person Area Code & Daytime Telephone Number
Enclose	ed 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
	Tellahassee, FL 32301

CR2E045 (03/12)

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this nge is submitted for a corporation organized under the laws of the State of Ohio
	r to change its registered office or registered agent, or both, in the State of Florida.
1. The name of t	he corporation: Arthur Middleton Capital Holdings, Inc.
2. The principal	office address: 8000 Freedom Avenue, Canton OH 44720
3. The mailing a	ddress (if different):
4. Date of incorp	poration/qualification: 08/03/2009 Document number: F09000003089
	street address of the current registered agent and registered office on file with the timent of State: (If resigned, enter resigned)
	119 Washington Ave Ste 600
	Miami, Beach 33139
6. The name and (if changed):	I street address of the new registered agent (If changed) and /or registered office
	CT Corporation System
	c/o C T Corporation System, 1200 South Pine Island Road
	PO Box NOT acceptable
	Plantation, Florida 33324
The street address changed will	ess of its registered office and the street address of the business office of its registered agent, be identical.
Such change wa authorized by th	is authorized by resolution duly adopted by its board of directors or by an officer so the corporation has been notified in writing of the change.
<u>-</u>	KIN VX V IV RAINES SUCH TO ILLY Printed or typed name and title
I hereby accept I further agree to performance of agent. Or, if the hereby confirm	the appointment as registered agent and agree to act in this capacity. To comply with the provisions of all statutes relative to the proper and complete my duties, and I am familiar with and accept the obligation of my position as registered is document is being filed merely to reflect a change in the registered office address, I that the corporation has been notified in writing of this change.
By: C T Con	Anna Bara 7/18/2013
If signing on be	half of an entity:
('n	nole Brung
Assist	CONC SOCIO CON * * FILING FEE: \$35.00 * * *

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
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