

713000003897

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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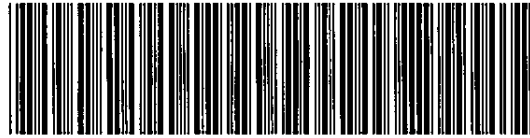
(Business Entity Name)

(Document Number)

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OCT 10 2014  
T. CARTER

RA/RO change

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** AC PLAZA INCORPORATED

Name of Corporation

**DOCUMENT NUMBER:** F13000003897

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:

SCHOOLEY, STEVEN R, ESQ.

Name of Contact Person

THE SCHOOLEY LAW FIRM

Firm/Company

108 HILLCREST STREET

Address

ORLANDO, FL 32801

City/State and Zip Code

sschooley@schooleylawfirm.com

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

For further information concerning this matter, please call:

SCHOOLEY, STEVEN R, ESQ

Name of Contact Person

at (407 ) 377-6300

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 NY  
\_\_\_\_\_ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: AC PLAZA INCORPORATED
2. The principal office address: 385 WEST MAIN STREET BABYLON, NY 11702
3. The mailing address (if different): \_\_\_\_\_

4. Date of incorporation/qualification: 9/11/2013 Document number: F13000003897

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)

INCORPORATING SERVICE, LTD.

1540 GLENWAY DRIVE

TALLAHASSEE, FL 32301

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

SCHOOLEY, STEVEN R, ESQ

108 HILLCREST STREET

P.O. Box NOT acceptable

ORLANOD, FL 32801

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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.

Alexander Alex  
Signature of an officer or director

ALEXANDER ALEX, PRESIDENT  
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]  
Signature of Registered Agent

September 23, 2014  
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)