

From: James Tanks III 11/5/21, 10:12 🕅 orida Department of State **Division of Corporations** 

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To: Division of Corporations . Fax Number : (850)617-6380 From: Account Name : C T CORPORATION SYSTEM Account Number : FCA00000023 Phone : (614)280-3338 Fax Number : (954)208-0845

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

Email Address:

**REGISTERED AGENT CHANGE** JOE BRIGHAM, INC.

Certificate of Status	0
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Page Count	02
Estimated Charge	\$43.75

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## 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 New Hampshire in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: JOE BRIGHAM, INC.

2. The principal office address: <u>720 Clough Mill Road Pembroke, NH, 03275</u>

3. The mailing address (if different):

4. Date of incorporation/qualification: 08/09/2021 Document number: F21000004541

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)

CORPORATE SERVICE CENTER

390-NORTH ORANGE AVE., STE 2300-N

ORLANDO, FL 32801-1684

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

C T Corporation System

1200 South Pine Island Road

P.O. Box NOT acceptable

Plantation, Florida 33324

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.

Date

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. Thereby confirm that the corporation has been notified in writing of this change. CT Corporation System

11/4/2021

By:

If signing on behalf of an entity:

Eric Jensen, Assistant Secretary, C T Corporation System

Signature of Register

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 (04:13) 11/05/2021 10:25AM 7727773071

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November 4, 2021

## FLORIDA DEPARTMENT OF STATE Division of Corporations

MEYNARD REALTY, INC. PO BOX 881976 PORT ST LUCIE, FL 34988

SUBJECT: MEYNARD REALTY, INC. REF: P21000067595

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.

You failed to make the correction(s) requested in our previous letter.

The specific business purpose of the professional association must be stated in the document.

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) 245-6051.

Stacy Prather Regulatory Specialist III FAX Aud. #: H21000400366 Letter Number: 921A00026913