

J 14159

Thomas Hinchey
2740 Cove View Dr N,
JACKSONVILLE, FLA 32259

City/State/Zip

Phone #

200003324802--0
-07/17/00--01098--016
*****35.00 *****35.00

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. _____
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

- ☐ Walk in ☐ Pick up time ☐ Certified Copy ☐ Certificate of Status
- ☐ Mail out ☐ Will wait ☐ Photocopy

NEW FILINGS

- ☐ Profit
☐ Not for Profit
☐ Limited Liability
☐ Domestication
☐ Other

OTHER FILINGS

- ☐ Annual Report
☐ Fictitious Name

AMENDMENTS

- ☐ Amendment
☐ Resignation of R.A., Officer/Director
☐ Change of Registered Agent
☐ Dissolution/Withdrawal
☐ Merger

REGISTRATION/QUALIFICATION

- ☐ Foreign
☐ Limited Partnership
☐ Reinstatement
☐ Trademark
☐ Other

FILED
00 AUG - 8 AM 10:08
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RACH9
CRG
8/8

Examiner's Initials



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

July 27, 2000

THOMAS HISHMEH
2740 COVE VIEW DR. N.
JACKSONVILLE, FL 32257

SUBJECT: THOMAS HISHMEH, INC.
Ref. Number: J14159

We have received your document for THOMAS HISHMEH, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

NUMBER 5 MUST BE COMPLETED WITH THE NAME AND REGISTERED OFFICE ADDRESS OF THE NEW REGISTERED AGENT.

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) 487-6880.

Karen Gibson
Corporate Specialist

Letter Number: 100A00040936

RECEIVED
00 AUG -8 AM 9:12
DIVISION OF CORPORATIONS

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, the undersigned corporation organized under the laws of the State of FLORIDA submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation is: THOMAS HISHMEH INC
2. The mailing address of the corporation is: 2740 Cove View Dr. N.
JACKSONVILLE, FLA 32257
3. Date of incorporation/qualification: 05/14/1986 Document number: 59-2674148
4. The name and address of the current registered agent and office:

ANSBACHER, LEWIS
4215 SOUTHPOINT BLVD Suite 100
JACKSONVILLE, FLA 32216

5. The name and address of the new registered agent and office: (P. O. Box Not Acceptable)

THOMAS HISHMEH
2740 Cove View Dr. N.
JACKSONVILLE, FLA 32257

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.

Thomas HishmeH
(Signature of an officer, chairman or vice chairman of the board)

7-10-00
(Date)

THOMAS HISHMEH Vice PRES
(Printed or typed name and title)

Having been named as registered agent and to accept service of process for the above stated corporation, 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.

Thomas HishmeH
(Signature of Registered Agent)

7-10-00
(Date)

If signing on behalf of an entity:

THOMAS HISHMEH
(Typed or Printed Name)

V-PRES
(Capacity)

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