578730

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Business Entity Name)		
(Document Number)		
Certified Copies	_ Certificates	of Status
Special Instructions to Filing Officer:		
	•	!

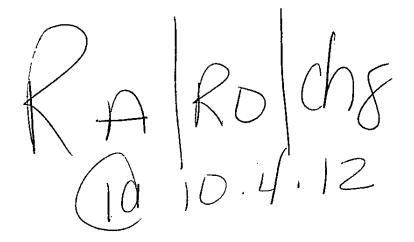
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COVER LETTER

TO:

Amendment Section Division of Corporations

 $_{ ext{SUBJECT:}}$ FIFTY-FIFTY, INC.

Name of Corporation

DOCUMENT NUMBER: J/8/30

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:

Vincent N. DelCorso

Name of Contact Person

FIFTY-FIFTY, INC.

Firm/Company

11515 66th Street North

Address

Largo, FL 33773

City/State and Zip Code

vdelcorso@gmail.com

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

For further information concerning this matter, please call:

Vincent N. DelCorso

_{ac}/2/ _\451

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

statement of cha	ange is submitted for a corporation orga	mized under the laws of the State of Florida
		stered agent, or both, in the State of Florida.
1. The name of t	the corporation: FIFTY-FIFTY,	INC.
2. The principal	office address: 17375 Spring F	Hill Dr., Brooksville, FL 34604
	44545.00!!	01 111 11 1 51 00770
3. The mailing a	address (if different): 11515 66th	Street North, Largo, FL 33773
4. Date of incorp	poration/qualification: 06/17/198	7 Document number: J78730
	d street address of the current registered rtment of State: (If resigned, enter resign	agent and registered office on file with the med)
	Charles R. Darst	
	3519 Palm Harbor Blvd.	cite The st
	Palm Harbor, FL 34683	
6. The name and (if changed):	d street address of the new registered ag	ent (if changed) and /or registered office
	Vincent N. DelCorso	
	11515 66th Street North	ا الله الله الله الله الله الله الله ال
	Largo, FL 33773	VT acceptable
The street addre	ess of its registered office and the stree be identical.	t address of the business office of its registered agent,
Such change wa authorized by th	as authorized by resolution duly adopte ne board, or the corporation has been n	ed by its board of directors or by an officer so officed in writing of the change.
Vinest	ire of an officer or director	Vincent N. DelCorso, President
I hereby accept I further agree t performance of agent. Or, if thi hereby confirm	the appointment as registered agent at to comply with the provisions of all sta my duties, and I am familiar with and is document is being filed merely to ret that the corporation has been notified	nd agree to act in this capacity. tutes relative to the proper and complete accept the obligation of my position as registered flect a change in the registered office address, I in writing of this change.
1 meent	mature of Registered Agent	September 28, 2012
	chalf of an entity:	
	-	
Ту	yped or Printed Name	

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