

J 79717

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: The Tagliarini Corporation, Inc.
Name of Corporation

DOCUMENT NUMBER: J79717

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:

Deborah Kerr Tagliarini
Name of Contact Person

The Tagliarini Corporation, Inc.
Firm/Company

6009 S. Russell Street
Address

Tampa, FL 33611
City/State and Zip Code

tagarch@tampabay.rr.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Deborah Kerr Tagliarini at (813) 293-7282 Cell
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**

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

1. The name of the corporation: The Tagliarini Corporation, Inc.
2. The principal office address: 6009 S. Russell Street
Tampa, FL 33611
3. The mailing address (if different): N/A
N/A
4. Date of incorporation/qualification: 06/25/1987 Document number: J79717
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)

Deborah Kerr Tagliarini
5702 Interbay Blvd.
Tampa, FL 33611

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

6009 S. Russell Street
P.O. Box NOT acceptable
Tampa, FL 33611

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FLORIDA DEPARTMENT OF STATE
TALLAHASSEE, FL 32314

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.

Deborah Kerr Tagliarini
Signature of an officer or director

Deborah Kerr Tagliarini DPT
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.

Deborah Kerr Tagliarini
Signature of Registered Agent

8/31/2012
Date

If signing on behalf of an entity:

Deborah Kerr Tagliarini
Typed or Printed Name

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