

K 83992

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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MAIL

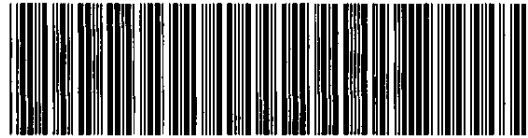
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2007/10
25/11

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: R.E. Chisholm Architects, Inc.
Name of Corporation

DOCUMENT NUMBER: K83992

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:

Robert E. Chisholm, FAIA
Name of Contact Person

R.E. Chisholm Architects, Inc.
Firm/Company

4921 SW 74th Court
Address

Miami, Florida 33155
City/State and Zip Code

bob@chisholmarchitects.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Robert E. Chisholm, FAIA at (305) 661.2070
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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 26, 2010

ROBERT E CHISHOLM, FAIA
4921 SW 74 CT
MIAMI, FL 33155

SUBJECT: R.E. CHISHOLM ARCHITECTS, INC.
Ref. Number: K83992

We have received your document for R.E. CHISHOLM ARCHITECTS, 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):

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

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) 245-6957.

Tracy L Lemieux
Regulatory Specialist II

Letter Number: 110A00017967

**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: R.E. Chisholm Architects, Inc.
2. The principal office address: 4921 SW 74th Court
Miami, Florida 33155
3. The mailing address (if different): _____
4. Date of incorporation/qualification: April 28, 1989 Document number: K83992
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)

Robert E. Chisholm, FAIA

7254 SW 48 Street

Miami, Florida 33155

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

Robert E. Chisholm, FAIA

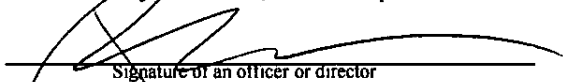
4921 SW 74th Court

P.O. Box NOT acceptable

Miami, Florida 33155

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.



Signature of an officer or director

Robert E. Chisholm, FAIA - 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 of Registered Agent

7/22/10

Date

If signing on behalf of an entity:

Robert E. Chisholm, FAIA - President

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 (8/05)

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