

K98034

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

(Business Entity Name)

(Document Number)

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2018 AUG -2 PM 3:42
SECRETARY OF STATE
TALLAHASSEE, FL

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08/06/18
DC



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 23, 2018

EDWARD D MURPHY
MURPHY CONSTRUCTION COMPANY OF TAMPA, IN
708 E. SKAGWAY AVE.
TAMPA, FL 33604

SUBJECT: MURPHY CONSTRUCTION COMPANY OF TAMPA, INC.
Ref. Number: K98054

RECEIVED
18 AUG -2 AM 11:25
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

The current name of the entity is as referenced above. Please correct your document accordingly.

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

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) 245-6050.

Susan Tallent
Regulatory Specialist II

Letter Number: 718A00015090

WE MOVED TO A NEW LOCATION. I WAS JUST
TRYING TO CHANGE OUR MAILING ADDRESS FROM
704 W. WATERS AVE. TAMPA, FL 33604 TO
708 E. SKAGWAY AVE. TAMPA, FL 33604

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Murphy Construction Company of Tam
Name of Corporation

DOCUMENT NUMBER: K98054

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:

Edward D Murphy
Name of Contact Person

Murphy Construction Company of
Firm/Company

708 E. Skagway Ave.
Address

Tampa, Fl. 33604
City/State and Zip Code

murpcon@verizon.net
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Edward D Murphy at (813) 363-6911
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: Murphy Construction Company of Tampa, Inc.
2. The principal office address: 708 E. Skagway Ave. Tampa, FL 33604

3. The mailing address (if different): _____

4. Date of incorporation/qualification: 06/26/1989 Document number: K98054

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)

Edward D Murphy

704 W. WATERS AVENUE

Tampa, FL 33604

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

Edward D Murphy

708 E. Skagway Ave.


P.O. Box NOT acceptable

Tampa, FL 33604

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2010 AUG -2 PM 3:42
SECRETARY OF STATE
TALLAHASSEE, FL

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

Edward D Murphy

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

Date

If signing on behalf of an entity:

Typed or Printed Name

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