

L01836

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RD Change

SJ

FELIX M. ADAMS
Attorney at Law

138 Bushnell Plaza
Suite 201
Bushnell, Florida 33513

Telephone (352) 793-6900
Facsimile (352) 793-6990

May 17, 2006

Florida Dept. Of State
Division of Corporations
P. O. Box 6327
Tallahassee, Florida 32314

Re: Lynch Recyclers, Inc.

Dear Sir/Madam:

Enclosed is a Statement of Change of Registered Agent together with a check in the amount of \$35.00 to cover the cost of the filing fee.

Sincerely,



Helen R. Blackmon
Paralegal

Enc.

**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: LYNCH RECYCLERS, INC.
2. The principal office address: 1616 West CR 48, Bushnell, Florida 33513
3. The mailing address (if different): same as above principal office address
4. Date of incorporation/qualification: July 13, 1989 Document number: L01836
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

Robert A. Lynch

1616 West CR 48

Bushnell, Florida 33513

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

Howard L. Grice

1616 West CR 48

(P.O. Box NOT acceptable)

Bushnell, Florida 33513

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.

Howard L. Grice
(Signature of an officer or director)

Howard L. Grice - 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.

Howard L. Grice
(Signature of Registered Agent)

May 17, 2006
(Date)

If signing on behalf of an entity:

(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

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