

L 45542

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

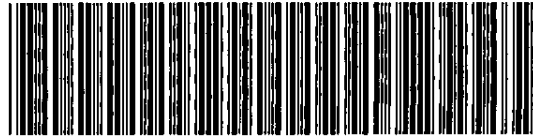
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600227859216

04/13/12--01026--008 **35.00

FILED
12 APR 13 PM 12:24
STATE
TALLAHASSEE, FLORIDA

APR 16 2012

C. MUSTAIN

[Handwritten signature]

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: surf bar & cocktail lounge inc
Name of Corporation

DOCUMENT NUMBER: L45542

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:

mary ann troy
Name of Contact Person

surf bar & cocktail lounge inc.
Firm/Company

181 north causeway
Address

new smyma bch
City/State and Zip Code

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

For further information concerning this matter, please call:

mary ann troy at (386) 6901373
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: surf bar and cocktail lounge, inc .

2. The principal office address: 181 north causeway new smyrna beach florida 32169

3. The mailing address (if different): _____

4. Date of incorporation/qualification: 2 29 1998 Document number: L45542

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)

mary ann troy

730 dougherty st.

new smyrna beach florida 32168

FILED
12 APR 13 PM 12:24
TALLAHASSEE, FLORIDA

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

nick pappas

181 north causeway

P.O. Box NOT acceptable

new smyrna beach florida 32169

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.

Mary Ann Troy
Signature of an officer or director

mary ann troy
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.

Nick Pappas
Signature of Registered Agent

4 12 2012
Date

If signing on behalf of an entity:

Nick Pappas
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)