## N02000002861

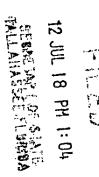
(Re	questor's Name)			
(Address)				
(Ad	ldress)			
(Cit	ty/State/Zip/Phone	= #\		
(Oil	grouto/Zipri none	<i></i> ,		
PICK-UP	☐ WAIT	MAIL		
(Bu	isiness Entity Nar	ne)		
(Do	ocument Number)			
Certified Copies	_ Certificates	s of Status		
	_			
Special Instructions to	Filing Officer:			

Office Use Only



600237547856

07/18/12--01009--028 \*\*35.00



AA Change

[JUL' 18 2012

T. LEWIS

## **COVER LETTER**

TO:

Amendment Section Division of Corporations

SUBJECT: Art Guild of Orange Park, Inc.

Name of Corporation

DOCUMENT NUMBER:

N02000002861

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:

## Leslie Kruzicki

Name of Contact Person

Art Guild of Orange Park, Inc.

Firm/Company

308 Scenic Point Lane

Address

Fleming Island, FL 32003

City/State and Zip Code

dkruzic59@earthlink.net

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Leslie Kruzicki

,904

215-8329

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

statement of cha	inge is submitted for a corporation or	0502, 607.1508, or 617.1508, Florida State ganized under the laws of the State of Flot gistered agent, or both, in the State of Flot	rida
1. The name of t	the corporation: Art Guild of Orar	nge Park, Inc.	
2. The principal	office address: 308 Scen	ic Point Lane	
	Fleming	Island, Fl 32003	3
3. The mailing a	address (if different):		
4. Date of incorp	poration/qualification: 4/11/2002	Document number: N020000	002861
	I street address of the current registere treet of State: (If resigned, enter resi	ed agent and registered office on file with gned)	the
	Carron Wedlund		
1203 Air Park Loop North			<b>5</b> 0 72
	Green Cove Springs, FL 32	043	
6. The name and (if changed):	l street address of the new registered a	agent (if changed) and /or registered office	18 PH
	Leslie Kruzicki		
	308 Scenic Point Lane		00 m
	Fleming Island, FL 32003	NOT acceptable	
The street address changed will	ess of its registered office and the stre be identical.	eet address of the business office of its re	egistered agent,
Such change wa authorized by th	as authorized by resolution duly adop te board, or the corporation has been	oted by its board of directors or by an offinotified in writing of the change.	icer so
Signatu	intel an officer or director	Leslie Kruzicki Printed or typed name and title	·····
I hereby accept I further agree to performance of agent. Or, if the hereby confirm	the appointment as registered agent to comply with the provisions of all s my duties, and I am familiar with an is document is being filed merely to r that the corporation has been notifie	and agree to act in this capacity. tatutes relative to the proper and comple d accept the obligation of my position as reflect a change in the registered office a ed in writing of this change.	ete registered address, I
Sigi	nature of Registered Agent	July 11, 2012	
If signing on be	half of an entity:		
Ty	vned or Printed Name		

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