## N93000002155

(Re	questor's Name)	
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(Cit	ty/State/Zip/Phone	e #)
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## **COVER LETTER**

TO: Amendment Section Division of Corporations NAME OF CORPORATION: Bradfordville Volunteer Fire ERESCUE Department, Inc N9300002155 Please return all correspondence concerning this matter to the following: Nanette M. Schimpf Name of Contact Person) c/o Moore Communications
(Firm/Company) 2011 Delta BIVd. Tullahussee FL 32303
(City/State and Zip Code) nanettes@moore commaroup.com
E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee \$343.75 Filing Fee & \$\infty\$\$ \$35.75 Filing Fee & □\$52.50 Filing Fee Certified Copy Certificate of Status Certified Copy (Additional copy is enclosed) (Additional Copy is Enclosed) **Mailing Address** Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, FL 32314 Tallahassee, FL 32301

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: Bradfordville Volunteer Fire & Rescue Department, Inc			
2. The principal office address: TFD - Station 15, Bunnerman Road,			
Tallahussee, FL 32312			
3. The mailing address (if different): P.O. BOX 1.5 405, Tallahassee FC			
32317			
4. Date of incorporation/qualification: 5/11/193 Document number: N9300000 2155			
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)			
Karl Hook			
1259 Sherrill Court			
Tallahussee FL 32312			
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):			
Hanette M Shimnt			
Nanette M. Schimpt  clo moore communications Group  2011 Delta Blrd.  P.O. Box NOT acceptable			
2011 Delta Blvd.  PO Box NOT acceptable.			
Tallahassee FC 32303			
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, of the corporation has been notified in writing of the change.			
Daniel P. Ginny			
Signature of an officer or director  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.			
White M Shumb 5/21/13 Signature of Registered Agent Date			
If signing on behalf of an entity:			
Nanette M. Schimpf			
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 (03/12)