P0000007417

(Re	questor's Name)	
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PICK-UP	WAIT	MAIL
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SECRETARY OF STATE
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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: DSEPH M. McHARRIS NC. (Name of Limited Liability Company)
Dear Sir or Madam:
The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
JOSEPH M. McHARIS (Name of Person)
JOSEPH M. Mothaces INC (Firm/Company)
11338 Bonta Beach Rd # 103
Bonita Springs D 34135 (City/State and Dip Code)
For further information concerning this matter, please call:
TARA ROE at (Z39) 948 – 6688 (Name of Person) (Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building Clother Circle Tallahassee, Florida 32301 MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
Enclosed is a check for the following amount:
\$25 Filing Fee \$\bigcup \$\sum \text{\$\sum \text{\$\sim \text{\$\sum \text{\$\sim \text{\$\sum \text{\$\sin \sin \text{\$\sin \text{\$\sin \text{\$\sin \text{\$\sin \text{\$\sin \sin \text{\$\sin \text{\$\



FLORIDA DEPARTMENT OF STATL Division of Corporations

January 25, 2008

JOSEPH M. MCHARRIS JOSEPH M, MCHARRIS INC. 11338 BONITA BEACH RD., #103 BONITA SPRINGS, FL 34135

SUBJECT: JOSEPH M. MCHARRIS, INC.

Ref. Number: P0000007417

We have received your document for JOSEPH M. MCHARRIS, INC. and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The above entity is a Florida corporation and the document and fee submitted are for a Florida limited liability company. The correct form is enclosed and an additional filing fee of \$10.00 is due.

To change the registered agent or registered office, or both, the enclosed form should be completed and returned to this office with a filing fee of \$35.

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) 245-6880.

Karen Gibson Document Specialist Supervisor

Letter Number: 808A00005413

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COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: JOSEPH M. MATARRIS INC. (Name of Corporation)
DOCUMENT NUMBER: P 0000007417
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: 1 A LA ROS (Name of Contact Person)
JOSEPH M. Mottares INC (Firm/Company)
11338 BONITA BEACH RD # 103 (Address)
BONTA SPRINGS FL 34135 (City/State and ZhPCode)
For further information concerning this matter, please call:
TACA ROE (Name of Contact Person) at (239) 948-6688 (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

Fursuant 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 Forda in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: JOSEPH M. McHARRIS INC
2. The principal office address: 11338 BONITA BEACH RD #103
BONITA SPRINGS, FZ 34135
3. The mailing address (if different):
4. Date of incorporation/qualification: 1/14/2000 Document number: P00000007417
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
9001 HIGHLAND WOODS BLVD # 4
BONITA SPRINGS FL 34135
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): N338 Bon-A Beach Beac
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) TOSEPH M. Modhares Presspent (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.
1-31-08
(Signature of Registered Agent) (Date)
If signing on behalf of an entity:
TOSEPH M. MOHANCEIS PER (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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