P00000040847

(Req	uestor's Name)	
(Add	ress)	
(Add	ress)	,
(City/	/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Busi	iness Entity Nar	ne)
(Document Number)		
Certified Copies	Certificates	s of Status
Special Instructions to Fi	iling Officer:	
٠.		

Office Use Only



800097930378

04/24/07--01038--009 **35.00

07 JUN -5 PH 4: 56
SECRETARY OF STATE
ALL AHASSEE, FLORIO

RAChange 6/6/07

COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: All Florida Septic TANK Service, TOC (Name of Corporation)
DOCUMENT NUMBER: POOCO 40847
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:
Nellie Ruth Joyner (Name of Contact Person)
All Florida Septic TANK Service, INC (Firm/Company)
8300 W. Beaver St. (Address)
JACKSONVILLE F-1 32220 (City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Contact Person) at (POH) 781-4818 (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

(05)



FLORIDA DEPARTMENT OF STATE Division of Corporations

May 1, 2007

NELLIE RUTH JOYNER ALL FLORIDA SEPTIC TANK SERVICES, INC. 8300 WEST BEAVER STREET JACKSONVILLE, FL 32220

SUBJECT: ALL FLORIDA SEPTIC TANK SERVICE, INC.

Ref. Number: P00000040847

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

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) 245-6906.

Darlene Connell Document Specialist

Letter Number: 307A00030078

07 JUN -5 M -9: 56
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALL Alliassife, FLORIDA

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
1. The name of the corporation: All Florida Septic Tauk Service, Inc. 2. The principal office address: 8300 W. BEAVER St. Jacksonville F1. 33330
3. The mailing address (if different): SAWC
4. Date of incorporation/qualification: April 2000 Document number: P00000040847
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
Nellie Ruth Joyner 1162 Pebble: Ridge Dr (NLD) TACKSONITE, Fl 32220 6. The name and street address of the new registered agent (if changed) and /or registered office SPR OF STATE O
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.
Mulie Kuth Ogyner Nelle Ruth Joyner (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.
Billy Wagne Joynes 4/23/07 (Signature of Registerph Jogent) (Date)
If signing on behalf of an entity:
BILLY WAYNE JOYNER (Typed or Printed Name)

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