## P00000054294

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PICK-UP	☐ WAIT	MAIL	
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(Document Number)			
Certified Copies	_ Certificates	s of Status	
Special Instructions to	Filing Officer		
Special Instructions to Filing Officer:			
J. HORNE			
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Office Use Only



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March 2, 2023

GERALD WOELCKE 612 BRIDGERS AVE W AUBURNDALE, FL 33823 US

SUBJECT: FI-FOIL COMPANY, INC.

Ref. Number: P00000054294

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):

The registered agent must sign accepting the designation.

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) 245-6050.

Jasmine N Horne Regulatory Specialist II



Letter Number: 423A00004875

## **COVER LETTER**

TO:

Amendment Section Division of Corporations

SUBJECT: Fi-Foil Company, Inc.			
Name of Corporation			
DOCUMENT NUMBER: P00000054294			
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:			
Gerald Woelcke			
Name of Contact Person			
Fi-Foil Company, Inc.			
Firm/Company			
612 Bridgers Ave W			
Address			
Auburndale, FL 33823			
City/State and Zip Code			
gwoelcke@fifoil.com			
E-mail address: (to be used for future annual report notification)			
For further information concerning this matter, please call:			
Gerald Woelcke 24, 863 \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \			
Corald Woelcke   State   Area Code & Daytime Telephone Number   Contact Person   Area Code & Daytime Telephone Number   Code   Code			
Enclosed is a \$35.00 check made payable to the Department of State.			
Mailing Address: Amendment Section  Street Address: Amendment Section			

Amendment Section Division of Corporations

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

CR2E045 (04/13)

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	provisions of sections 607.0502, 617.0502, inge is submitted for a corporation organize ir to change its registered office or registere			
1. The name of t	the corporation: Fi-Foil Company, Inc.			
	office address: 612 Bridgers Avenue W, Aub	ourndale, FL 33823		
3. The mailing a	address (if different):			
_	poration/qualification: 06/05/2000			
	d street address of the current registered age rtment of State: (If resigned, enter resigned)			
	CF Registered Agent, Inc.	17.50 M		
	100 S. Ashley Dr., Suite 400			
	Tampa, FL 33602			
6. The name and (if changed):	d street address of the new registered agent	(if changed) and /or registered office		
	Gerald Woelcke			
	612 Bridgers Avenue W			
	P O Box NOT acceptable			
	Auburndale, FL 33823			
The street address changed will	ess of its registered office and the street ac be identical.	dress of the business office of its registered agent.		
Such change wa authorized by the	as authorized by resolution duly adopted be opard, or the corporation has been notif	by its board of directors or by an officer so fied in writing of the change.		
		Gerald Woelcke, CFO		
- 0	ite is an officer of director	Printed or typed name and title		
I hereby accept I further agree of my duties, an document is bei corporation ha	the appointment as registered agent and to comply with the provisions of all statuted and familiar with and accept the obliging filled merely to reflect a change in the specific point in the specific change.	agree to act in this capacity. es relative to the proper and complete performance ation of my position as registered agent. Or, if this registered office address, I hereby confirm that the		
	110000	11/30/2022		
Gri	Matthe of Registered Agent	Date		
If signing on be	chalf of an entity:			
Gerald Woelcke				
1	yped or Printed Name			

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