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COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Billy Tibbs, Inc. (Name of Corporation)
DOCUMENT NUMBER: <u>P0000098925</u>
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:
Carol Tibbs (Name of Contact Person)
Billy Tibbs, Inc. (Firm/Company)
136 Plantation Blud. (Address)
Ft. Pierce, Fl. 34982 (City/State and Zip Code)
For further information concerning this matter, please call:
Carol Thobs at (772) 467-0598 (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 Street Address: Amendment Section Division of Corporations Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

Tallahassee, FL 32314

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 Florida.
1. The name of the corporation: Billy Tibbs, Inc.
2. The principal office address: 136 Plantation Blvd. Ft. Pierce, Fl. 34982
3. The mailing address (if different):
4. Date of incorporation/qualification: 10/2000 Document number: P0000098925
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
Billy Tibbs
330 Divon Dr.
Billy Tibbs 330 Dixon Dr.
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Billy Tibbs,
136 Plantation Blud.
(P.O. Box NOT acceptable) Ft. Pierce, Fl. 34982
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.
x Billy Tibbs, Pres.
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.
X Billy (Signature of Restered Agent) 9-8-08 (Date)
If signing on behalf of an entity:
(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 (8/05)