

P00000100492

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600021995076

08/14/03--01065--008 **70.00

FILED
03 AUG -4 PM 4:24
CLERK OF STATE
TALLAHASSEE, FLORIDA

7.5 8/7/03

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

Pursuant to the provisions of Sections 607.0501 and 607.0502 or 607.1508, 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: Florick International Corporation
2. The principal office address: 540 N. Hwy. 434
Apopka, FL 32712
3. The mailing address (if different):
4. Date of incorporation/qualification: October 24, 2000
Document number: P00000100492
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

Richard M. Tanner
500 Golf Tee Lane, Apt. 124
Longwood, Florida 32779

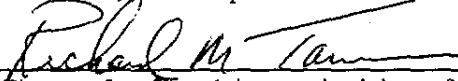
6. The name and street address of the new registered agent (if changed) and/or registered office (if changed):

Richard M. Tanner
3300 S. Congress Ave. #14
Boynton Beach, Florida 33426

3300 S. Congress Ave. #14
Boynton Beach, Florida 33426

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, chairman or vice chairman of the board)(Printed or typed name and title)

Richard M. Tanner Director

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.



(Signature of Registered Agent)(Date)

If signing on behalf of an entity:

(Typed or Printed Name)(Capacity)

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

Make checks payable to Florida Department of State and Mail to:
Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

FILED
03 AUG -4 PM 4:24
CLERK OF STATE
TALLAHASSEE, FLORIDA