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COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Hobbs Services Inc (Name of Corporation)
DOCUMENT NUMBER: P01 0000 177.15
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:
Pam Hobbs (Name of Contact Person) Hobbs Services Inc (Firm/Company) Po Box 35847 (Address) Panama Lity Ft 32412 (City/State and Zip Code)
For further information concerning this matter, please call:
Pan Hubbs at (80) 763-2001 (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

٠.	Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, Anis statement of change is submitted for a corporation organized under the laws of the State of	19
	in order to change its registered office or registered agent, or both, in the State of Florida.	
	1. The name of the corporation: Hobbs Selvices, Inc.	
	2. The principal office address: 920 N East Ave	
	Panama City, F1 32401	:
NI JA	3. The mailing address (if different): PO Box 35847	
,~~	Panuma (its iF132412	
	4. Date of incorporation/qualification: 01/2001 Document number: P010000/Z	Z15
	5. The name and street address of the current registered agent and registered office on file with the	
	Florida Department of State:	
	Hobbs, V. Kenneth	٠.
	3351 Preakness Pl	
	Chieley F1 32428	
NU	(if changed):	FI
	Vicail Kennoth Hobbe	m
	Man al Goot Ann	<u> </u>
	(P.O. Box NOT acceptable)	র ্
	Panama aty, FT 32401	8
•	The street address of its registered office and the street address of the business office of its registered ag	ent,
	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) (Printed or typed name and title) I hereby account the approximent as registered agent and agree to act in this canacity.	
•	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 perform of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, i document is being filed merely to reflect a change in the registered office address, I hereby confirm that corporation has been notified in writing of this change.	ance this the
	Vinil Ken Holl	
	(Signature of Registered Agent) (Date)	_
•	If signing on behalf of an entity:	
	<i></i>	
	(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)