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Office Use Only



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TALLAHASSEE FLORIDA

FLORIDA DEPARTMENT OF STATE TALLAHASSEF FLORIDAS

March 7, 2013

MICHAEL B. WALLER HORIZON COACH, INC. 1442 S W HWY 17 ARCADIA, FL 34266

SUBJECT: HORIZON COACH, INC.

Ref. Number: P01000042764

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

We regret that we were unable to contact you by phone. Please return the corrected document with a letter providing us with a telephone number where you can be reached during working hours.

The designation of the registered agent must be at a Florida street address.

The new registered agent, which is DEREK TAACA must sign document below on the form in the space for registered agent acepting appointment.

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.

Tina Roberts Regulatory Specialist II

Letter Number: 713A00005420



FLORIDA DEPARTMENT OF STATE Division of Corporations

February 25, 2013

MICHAEL B. WALLER HORIZON COACH, INC. 1442 S W HWY 17 ARCADIA, FL 34266

SUBJECT: HORIZON COACH, INC.

Ref. Number: P01000042764

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

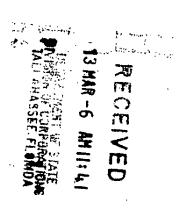
Please complete block # 6 with the new registered agent name and address and the new registered agent must sign as registered agent accepting appointment.

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.

Tina Roberts Regulatory Specialist II

Letter Number: 713A00002506





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	
in order to change its registered office or registered agent, or both, in the State of Florida.	
1. The name of the corporation: HORIZON COACH, INC.	
2. The principal office address: 1442 SW HIGHWAY 17, ARCADIA, FL 34266	
3. The mailing address (if different): P.O. BOX 2706, CRESTED BUTTE, CO 81224-2706	
4. Date of incorporation/qualification: 4/27/200 Document number: P01000042764	
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)	
MICHAEL B. WALLER	
1442 SW HIGHWAY 17	
ARCADIA, FL 34266	
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):	
DEREK TAACA	
POBOX 2706 1442 SW HW/ 17	
P.O. Box NOT acceptable P.O. Box NOT acceptable Liested Butte P.O. 01224-270 Dicado FL 342) (D
Check a do le, Lo dizzi z v o	· τ
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.	
DEREK TAACA Signature of an officer or director Printed or typed name and life	
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 inerely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.	-
7 : 12.31-12	
Signature of Registered Agent Date	
If signing on behalf of an entity:	
michael Waller - Honzon Coach	
Typed or Printed Name	

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