

PO10000045974

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

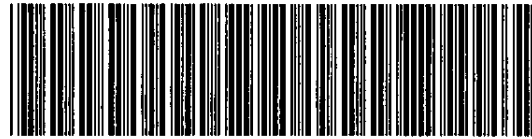
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
17 FEB 23 AM 10:08

FEB 24 2017
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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: RL PARTS, INC.

Name of Corporation

DOCUMENT NUMBER: P01000045974

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:

Kristina M. Hudson, Esq.

Name of Contact Person

Booth & Cook, P.A.

Firm/Company

7510 Ridge Road

Address

Port Richey, FL 34668

City/State and Zip Code

kris@boothcook.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Kris Hudson

Name of Contact Person

at (727) 842-9105

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

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DIVISION OF CORPORATIONS
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**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: RL Parts, Inc.
2. The principal office address: 14525 No. Florida Ave., Tampa, FL 33613
- _____
3. The mailing address (if different): _____
- _____
4. Date of incorporation/qualification: 05/03/2001 Document number: P01000045974
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)

Resigned

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

Corey Kempton

14525 No. Florida Ave.


P.O. Box NOT acceptable

Tampa, FL 33613

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DIVISION OF CORPORATIONS


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 or director

Corey Kempton
Printed or typed name and title

*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

2/16/17
Date

If signing on behalf of an entity:

Corey Kempton
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 (03/12)