## 01000093713

(Re	questor's Name)	
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	,	
(Cit	cy/State/Zip/Phone	e #)
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(Do	cument Number)	
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## FLORIDA DEPARTMENT OF STATE Division of Corporations

July 26, 2006

**DEBBIE LEE** WILLIAM E WYROUGH JR ATTORNEY AT LAW 10859 EMERALD COAST PKWY W #204-426 MIRAMAR BEACH, FL 32550

SUBJECT: KASIA & COMPANY, INC.

Ref. Number: P01000093713

We have received your document and check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

There is a balance due of \$10.00. Refer to the attached fee schedule for a breakdown of the fees. Please return a copy of this letter to ensure your money is properly credited.

Amendments for Florida profit corporations are filed in compliance with section 607,1006. Florida Statutes. Please see the enclosed information.

The fee to file articles of amendment is \$35. Certified copies are optional and are 

should be completed and returned to this office with a filing fee of \$35.

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6906.

Darlene Connell **Document Specialist**  ত্র E Letter Number: 206A00047271 ু

## **COVER LETTER**

TO: Amendment Section Division of Corporations
SUBJECT: Kasia & Company, Inc.  (Name of Corporation)
DOCUMENT NUMBER: P01000093713
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:
Debbie Lee (Name of Contact Person)
William E. Wyrough, Jr., Attorney at Law (Firm/Company)
10859 Emerald Coast Pkwy W, #204 - 426 (Address)
Miramar Beach FL 32550 (City/State and Zip Code)
For further information concerning this matter, please call:
Debbie Lee at (850 ) 650-7797  (Name of Contact Person) (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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes inge is submitted for a corporation organized under the laws of the State of Florida in the change its registered office or registered agent, or both, in the State of Florida.	· !	
1. The name of	the corporation: Kasia & Company, Inc.		
2. The principal	office address: 251 Long Lake Dr., Destin FL 32541		
3. The mailing a	address (if different):		
4. Date of incorp	poration/qualification: 9/24/01 Document number: P01000093713		
	d street address of the current registered agent and registered office on file with the truent of State:		
	D, Jakubiec		<del>ت</del>
	251 Long Lake Drive	96	SE
	Destin, FL 32550	06 AUG 18	CRET
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):			FILED ARY OF CORP
	William E. Wyrough, Jr., Attorney at Law	PH 4: I	STA ORA
	10859 Emerald Coast Pkwy W, #204 - 426	0	SHOLL TE
	(P.O. Box NOT acceptable)  Miramar Beach FL 32550		
The street addre	ess of its registered office and the street address of the business office of its registed be identical.	tered a	igent,
Such change wa authorized by the	as authorized by resolution duly adopted by its board of directors or by an officence board, or the corporation has been notified in writing of the change.	· so	
(Signati	ire of an officer or director) (Printed or typed name and fitte)		<del></del>
I hereby accept I further agree of my duties, an document is bei corporation has	the appointment as registered agent and agree to act in this capacity. to comply with the provisions of all statutes relative to the proper and complete part of the proper and accept the obligation of my position as registered agent and fulfill the registered office address, I hereby confit been notified in writing of this change.	perfort t. Or, irm th	mance if this at the
	Multiple of Registered Agent)  8 15 06  (Date)		
<i>*</i>	half of an entity:		
ستااتم	F. Wyroul, Tr.  Typed or Printed Name) (1)		

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