

PO20000584

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

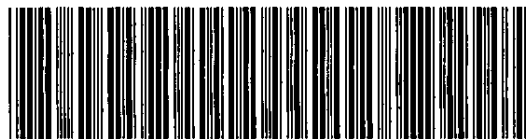
Certified Copies \_\_\_\_\_

Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only

9/16/08



300135531093

09/12/08--01012--013 \*\*35.00

RA-  
Charge

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2008 SEP 12 AM 1:48

FILED

## COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: Sharp Carts Inc.  
(Name of Corporation)

DOCUMENT NUMBER: P02000001584

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:

Judy Adams  
(Name of Contact Person)

Sharp Carts Inc.  
(Firm/Company)

2 Forsyth Rd.  
(Address)

Winter Park FL 32792  
(City/State and Zip Code)

For this matter, please call:

at (407) 671-3150  
(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**

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 \_\_\_\_\_ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Sharp Carts Inc.

2. The principal office address: 2922 Forsyth Rd.  
Winter Park FL 32792

3. The mailing address (if different): \_\_\_\_\_

4. Date of incorporation/qualification: 01/02 Document number: PD2000001584

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

John Loy  
516 Hillcrest St.  
Orl FL 32803

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

Judy Adams  
2922 Forsyth Rd.  
(P.O. Box NOT acceptable)  
Winter Park FL 32792

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2008 SEP 12 AM 1:48

FILED

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.

J Adams  
(Signature of an officer or director)

Judy Adams Pres.  
(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.*

J Adams  
(Signature of Registered Agent)

9/8/08  
(Date)

If signing on behalf of an entity:

Judy Adams  
(Typed or Printed Name)

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