P0200030055

uestor's Name)	
ress)	•
ress)	
/State/Zip/Phone	e #)
☐ WAIT	MAIL
iness Entity Nar	me)
ument Number)	
Certificates	s of Status
iling Officer:	
	ress) /State/Zip/Phone WAIT iness Entity Nar ument Number) Certificates

Office Use Only



600280124116

01/04/16--01005--009 **35.00

2016 JAN -4 PH 12: 53
SECRETARY OF STATE
ANALYSEE FLORIDI

JAN 0 7 2016 C. CARROTHERS

COVER LETTER.

Division of Corporations
SUBJECT: Central Florida Orycleaning, Inc.
DOCUMENT NUMBER: <u>P0200030055</u>
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:
JASON LILLEY Name of Contact Person
CENTRAL FLORINA DRYCLEANING INC.
1145 20 th PIACE Address
VERD BEACH FL 32960 City/State and Zip Code
CHAYLENE LILLEY. CFDC@ QMAIL. Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
CHAY LIVEY at (772) 567-4387 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

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: CENTRAL FLORIDA DRYCLEANING, INC.
2. The principal office address: 1145 20th Place
VFRO BEACH, FL 32960
3. The mailing address (if different):
4. Date of incorporation/qualification: 3-19-02 Document number: P02000030055
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)
HARRIET COTHERN
1145 20th Place
VERO BEACH, FL 32960
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
JASON J. Lilley
1145 20th PlacE
VERO BEACH FL 30960
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.
Warrieti Othern HARRIET COTHERN PRES Signature of the other of director 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 V.P. DCC 31, 2015
If signing on behalf of an entity:
JASON J. Lilley V.P. Typed or Printed Name

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