P0200050384

(Re	equestor's Name)	
(Ad	dress)	
bA)	dress)	
(Cit	y/State/Zip/Phone	e #)
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(Bu	siness Entity Nan	ne)
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2002 OCT 28 PH 1: 20

R.A. Charge LFT 10-31-02

TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: A Lucey Corporation, Inc.
(Name of corporation)
DOCUMENT NUMBER: PO20050384
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:
Amy F. Lucey
Amy F. Lucey (Name of person)
A Lucey Corporation, Inc.
(Name of firm/company)
4340 Mactavish Street
(Address)
Cocoa, FL 32927
(City/state and zip code)
For further information concerning this matter, please call:
Amy F. Lucey at (321) 631-9104
Amy F. Lucey at (321) 631-9104 (Name of person) (Area code & daytime telephone number)
Enclosed is a \$35.00 check made payable to the Department of State.
Mailing Address:Street Address:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327409 E. Gaines StreetTallahassee, FL 32314Tallahassee, FL 32399

, STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

	of change is submitted fo	r a corporation organized	7.1508, or 617.1508, Flori d under the laws of the State	e of	
of Florida.	in order to chan	ge its registered office or	r registered agent, or both,	in the State	
•	of the corporation: A Luce	y Corporation, Inc.		<u> </u>	· · · <u>+</u>
2. The princip	al office address: 4340 M	lactavish Street			- -
Cocoa, FL				20 20	
3. The mailing	g address (if different):			1510N OF 12 OCT 2	SECRETAL
4. Date of inco	orporation/qualification: _	May 8, 2002 D	ocument number: P02000		200 200 200 200 200 200 200 200 200 200
	nd street address of the co partment of State: Business Filings Incorp	irrent registered agent and	d registered office on file wi		BATIONS
	1000 West Avenue, Su	te 1114			
	Miami Beach, FL 3313)			
6. The name a changed):	and street address of the Amy F. Lucey	new registered agent (if	changed) and /or registere	ed office (if	
	4340 Mactavish Street				
	(P.O. B Cocoa, FL 32927	ox or personal mailbox NOT accepts	able)	· ·	
			of the business office of its		
Such change vauthorized by	vas authorized by resolut the board, or the corpora	Λ	oard of directors or by an o writing of the change.		
(Signature of an office	er, chairman or wee chairman of the	board) Any	F. Luecy Dire	ctor	
I hereby accep I further agree performance of registered age office address,	ot the appointment as reg to comply with the prov of my duties, and I am fan nt. Or, if this document I hereby confirm that th	istered agent and agree is ions of all statutes rela tiliar with and accept the second to re corporation has been re	to act in this capacity. tive to the proper and comp e obligation of my position eflect a change in the regist totified in writing of this ch	olete as tered ange.	
a	Signature of Registered Agent)		0/3/02 (Date)	<u> 2-4:::</u> 2	···
If signing on beh	alf of an entity:				
	(Typed or Printed Name)	<u> </u>	(Capacity)	<u> المساحد</u>	" <u>.</u> *

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