

P020000089478

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

R.A. change

T BROWN FEB 12 2003

## TRANSMITTAL LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** MURRELL IRRIGATION, INC  
(Name of corporation)

**DOCUMENT NUMBER:** P02000089478

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:

DARON E. MURRELL  
(Name of person)

MURRELL IRRIGATION INC.  
(Name of firm/company)

PMB 295 445 STATE RD 13 N # 26  
(Address)

JACKSONVILLE , FL 32259  
(City/state and zip code)

For further information concerning this matter, please call:

DARON E. MURRELL at ( 904 ) 813-8568  
(Name of 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  
409 E. Gaines Street  
Tallahassee, FL 32399



FLORIDA DEPARTMENT OF STATE

Ken Detzner  
Secretary of State

February 5, 2003

DARON E. MURRELL  
MURRELL IRRIGATION INC.  
PMB 295, 445 STATE ROAD 13 N, #26  
JACKSONVILLE, FL 32259

SUBJECT: MURRELL IRRIGATION, INC.  
Ref. Number: P02000089478

We have received your document for MURRELL IRRIGATION, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

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) 245-6869.

Teresa Brown  
Document Specialist

Letter Number: 703A00007678

**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: MURRELL IRRIGATION, INC.

2. The principal office address: PMB 295 445 STATE RD 13 N # 26 JACKSONVILLE , FL 32259

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

4. Date of incorporation/qualification: AUGUST 16, 2002 Document number: P02000089478

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

FLORIDA AGENT SERVICES , LLC

1221 BRICKELL AVE. 9TH FLOOR

MIAMI FL 33131

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

DARON E. MURRELL

1333 HIDEAWAY DR. SOUTH

(P.O. Box or personal mailbox NOT acceptable)

JACKSONVILLE ,FL 32259

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.

Daron E. Murrell (President)  
(Signature of an officer, chairman or vice chairman of the board)

DARON E. MURRELL- PRESIDENT  
(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.*

Daron E. Murrell  
(Signature of Registered Agent)

FEBRUARY 7TH 2003  
(Date)

If signing on behalf of an entity:

\_\_\_\_\_  
(Typed or Printed Name)

\_\_\_\_\_  
(Capacity)

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE AND MAIL TO:  
DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

**FILED**  
03 FEB 11 PM 3:48  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA