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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MAY 31 2019
T SCHROEDER

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Treasure Coast Lifts Systems
Name of Corporation

DOCUMENT NUMBER: PO2000093874

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:

Josh
Josh Busch
Name of Contact Person

All Quality Equipment Co
Firm/Company

3481 S. 25th Street
Address

Fort Pierce FL 34981
City/State and Zip Code

~~Service@ageforklifts.com~~
E-mail address: (to be used for future annual report notification)

AQE Forklifts@gmail.com

For further information concerning this matter, please call:

CRAIG LAW at (561) 313-4413
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: Treasure Coast lift system
2. The principal office address: 3481 S. 25th Street
Fort Pierce FL 34981
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 2002 Document number: PO200009387
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)

Joshua Busch
Treasure Coast Lift Systems
3481 S. 25th Street, Fort Pierce 34981

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

CRAIG LAW
1327 Duval Street
Jupiter, FL 33458

P.O. Box NOT acceptable

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.

[Signature]
Signature of an officer or director

CRAIG LAW
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]
Signature of Registered Agent

5/14/19
Date

If signing on behalf of an entity:

Josh Busch
Typed or Printed Name

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

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