

P030000028748

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

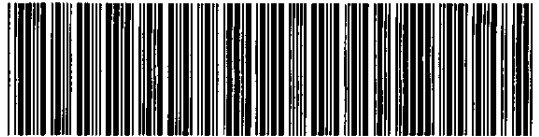
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900161793029

10/16/09--01012--009 **35.00

Ro ch

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
09 OCT 16 PM 12:34

Roberts OCT 19 2009

COVER LETTER •

TO: Amendment Section
Division of Corporations

SUBJECT:__

Name of Corporation

CBI, Inc.

DOCUMENT NUMBER:__ *P03000028748*

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:

Name of Contact Person

Christopher M. Brown

Firm/Company

CBI, Inc.

Address

1240 SW 3rd Avenue

City/State and Zip Code

Cape Coral, FL 33991

E-mail address: (to be used for future annual report notification)

Cbrown71772@mac.com

For further information concerning this matter, please call:

239-340-3334

Name of Contact Person

Christopher Brown

at (239)

340-3334

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: CBI, Inc.
2. The principal office address: 1240 SW 3rd Avenue
Cape Coral, FL 33991
3. The mailing address (if different): SAME

4. Date of incorporation/qualification: 3/17/2003 Document number: P03000028748

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)

Christopher M. Brown
3911 SE 19th Place
Cape Coral, FL 33904

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

Christopher Brown
1240 SW 3rd Avenue
Cape Coral, FL 33991

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

Christopher M. Brown, 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.

[Signature]
Signature of Registered Agent

DATE

If signing on behalf of an entity:

Typed or Printed Name

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

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

RECEIVED
DIVISION OF CORPORATIONS
OCT 16 PM 12:34