

PD30000 52572

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

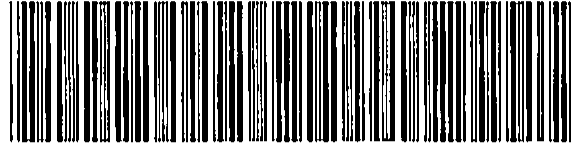
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

AUG 27 2019
C. MCNAIR

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Visual Fx, Inc.

Name of Corporation

DOCUMENT NUMBER: P03000052572

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:

Rebecca S. Holman

Name of Contact Person

Visual Fx, Inc.

Firm/Company

430 North Orange Avenue

Address

Green Cove Springs, FL 32043

City/State and Zip Code

becky@visualfxpaint.com

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

For further information concerning this matter, please call:

Rebecca Holman

Name of Contact Person

at (904) 298-0777

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

2009 AUG 26 PM 4:30
SECURITY UNIT
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: Visual Fx, Inc.
2. The principal office address: 430 North Orange Avenue
Green Cove Springs, Florida 32043
3. The mailing address (if different): Same

4. Date of incorporation/qualification: 2/7/2019 Document number: P03000052572

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)

Rebecca S. Holman

3290 Byron Road

Green Cove Springs, Florida 32043

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

Visual Fx, Inc., Paul Holman

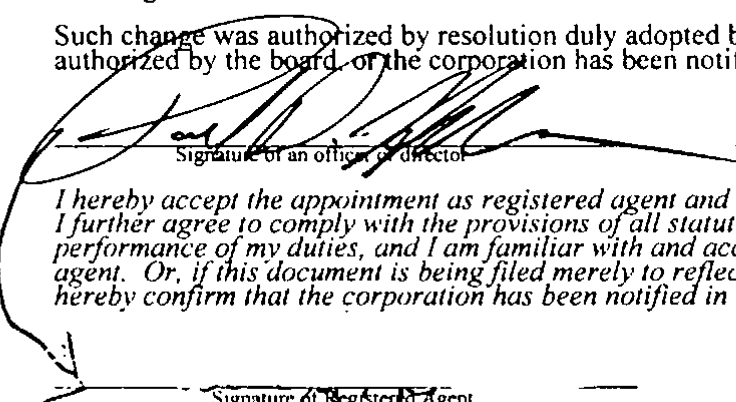
430 North Orange Avenue

P.O. Box NOT acceptable

Green Cove Springs, Florida 32043

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 of an officer or director

Paul D. Holman

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.

5/13/2019

Signature of Registered Agent

Date

If signing on behalf of an entity:

Rebecca S. Holman

Typed or Printed Name

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