## P03000H796

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SEP. -3 2013

R. WHITE

## **COVER LETTER**

TO: Amendment Section Division of Corporations
SUBJECT: FIVE FR. 12 PARINERS FACTOR Name of Corporation
DOCUMENT NUMBER: P0300064796
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:
JOHN C F2112  Name of Contact Person
FIVE FRITZ PARTNERS INC.
2612 OAK GROVE AVE Address
ST AUCUSTINE FC 32092 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Contact Person at (904) 940 - 7715  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

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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.
1. The name of the corporation: FNE FRITZ PARTNERS, INC
2. The principal office address: 26100 S W 112 AVE
HOMESTERD, FL 33032
3. The mailing address (if different):
4. Date of incorporation/qualification: <u>06/11/2003</u> Document number: <u>P03 0000 64 7 96</u>
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)
LESTER B. LAW C/O GRANT FRIOKIN PEARSON ATHAN & CACL
5551 RIOGEWOOD DRNE SUTTE 501
MAPLES, FL 34108
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
JOHN C FRITZ ALL TO ALL
2612 OAE GROVE AVE P.O. Box NOT acceptable
JOHN C FRITZ  ALL STARY OF STA
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 corporation has been notified in writing of the change.
Signature of an officer or prector  Signature of an officer or prector  Signature of an officer or prector  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 of Registrati Agent Queges 7 23, 2013  Date
If signing on behalf of an entity:
TOAIY C FATTZ  Typed or Printed Name

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