

P030000126166

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

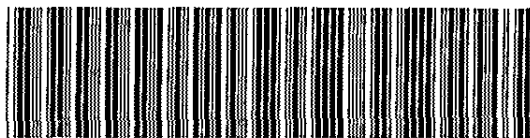
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TALLAHASSEE, FLORIDA

## TRANSMITTAL LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: Staid Engineering, Inc.  
(Name of corporation)

DOCUMENT NUMBER: PD3000126166

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:

Thomas Boyer

(Name of person)

Staid Engineering, Inc.

(Name of firm/company)

1949 Ancote Vista

(Address)

Tarpon Springs, FL 34689

(City/state and zip code)

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For further information concerning this matter, please call:

Thomas Boyer

(Name of person)

at

( 727 ) 365 - 5704

(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

Glenda E. Hood  
Secretary of State

December 11, 2003

THOMAS BOYER  
STAD ENGINEERING, INC.  
1949 ANCLOTE VISTA  
TARPON SPRINGS, FL 34689

SUBJECT: STAD ENGINEERING, INC.  
Ref. Number: P03000126166

STATE  
TALLAHASSEE, FLORIDA

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We have received your document for STAD ENGINEERING, 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):

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

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) 245-6964.

Irene Albritton  
Document Specialist

Letter Number: 903A00066680

*Rec.*  
*1/8/04*

**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: Staid Engineering Inc.  
2. The principal office address: 3275 Haviland Court, Ste 103  
Palm Harbor FL 34684  
3. The mailing address (if different): \_\_\_\_\_  
4. Date of incorporation/qualification: 11/5/03 Document number: P03000126166

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

~~Thomas R. Boyer~~ **SPIEGEL & ULTRERA P.**  
~~3275 Haviland Court, Ste 103~~ **1840 SW 22ND ST, 4TH**  
~~Palm Harbor, FL 34684~~ **MIAMI, FL 33145**

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

Thomas R. Boyer  
1949 Anclole Vista  
(P.O. Box or personal mailbox NOT acceptable)  
Tarpon Springs, FL 34689

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DEPT OF STATE  
TALLAHASSEE, FLORIDA

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.

Carrie A. Boyer Carrie A. Boyer, Vice President  
(Signature of an officer or director) (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.*

Thomas R. Boyer 12/02/03  
(Signature of Registered Agent) (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  
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314