

P04000046376

(Requestor's Name)

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SECURITY & STATE  
TALLAHASSEE, FLORIDA

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R.A. change

## COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: G MITCH AND ASSOCIATES INC  
(Name of corporation)

DOCUMENT NUMBER: P040000 46376

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:

GEORGE MITCH

(Name of contact person)

G. MITCH + ASSOCIATES INC.

(Firm/Company)

463 NW BLUE LAKE DR

(Address)

PORT ST. LUCAS FL 34986

(City/state and zip code)

For further information concerning this matter, please call:

G. MITCH

(Name of contact person)

at ( 772 ) 708 6330

(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

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 FL in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: G. MITSCH & ASSOCIATES INC.
2. The principal office address: 463 NW BLUE LAKE DR  
PORT ST. LUCIE FL 34986
3. The mailing address (if different): \_\_\_\_\_

4. Date of incorporation/qualification: 3/12/04 Document number: P04000046376

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

BUSINESS FILING Incorporated  
660 E JEFFERSON ST  
TALLAHASSEE, FL 32301

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

GEORGE MITSCH  
463 NW BLUE LAKE DR  
(P.O. Box NOT acceptable)  
PORT ST. LUCIE FL 34986

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SECRETARY 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.

George Mitsch  
(Signature of an officer or director)

GEORGE MITSCH  
(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.

George Mitsch  
(Signature of Registered Agent)

10/27/04  
(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