

PD4000075349

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

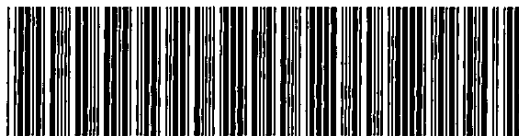
(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS
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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Sparky B's Sales & Service, Inc.
(Name of Corporation)

DOCUMENT NUMBER: P04000075349

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:

Connie F. Mettille
(Name of Contact Person)

Sparky B's Sales & Service, Inc.
(Firm/Company)

214-A Business Park Drive
(Address)

Lynn Haven, Florida 32444
(City/State and Zip Code)

For further information concerning this matter, please call:

Connie F. Mettille at (850) 832-4238
(Name of Contact Person) (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



Sparky B's Electric

Commercial, Residential, New Construction & Repairs

Home & Commercial Generators

214-A Business Park Drive

Lynn Haven, FL 32444

Phone: (850) 832-4238 Fax: (850) 265-2606

License # ER13013194

January 23, 2008

To whom it may concern,

I thought I had filed the correct form for changing the registered Agent of a business. I think I may have sent in the wrong form with a check in the amount of \$35.00 check # 1092 dated 1/23/08 drawn on Regions Bank. I am enclosing the correct form and would like for you to apply the check with the corrected form please, sorry for the mix up in forms. If there is a problem or If I need to send another please could you please call or e-mail me t 850-832-4238 or e-mail cmettille@bellsouth.net.

Thanks and have a great day!!!

Connie Mettille
CEO / Director

RECEIVED
2008 JAN 30 AM 8:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 25, 2008

CONNIE F. METTILLE
SPARKY'S B'S SALES & SERVICE, INC.
214-A BUSINESS PARK DRIVE
LYNN HAVEN, FL 32444

SUBJECT: SPARKY B'S SALES & SERVICE INC.
Ref. Number: P04000075349

We have received your document for SPARKY B'S SALES & SERVICE 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):

The application/form submitted does not meet the requirements of this office; please complete the attached application/form.

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
Regulatory Specialist II

Letter Number: 308A00005483

**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: Sparky B's Sales & Service, Inc.
2. The principal office address: 214-A Business Park Drive
3. The mailing address (if different): _____

4. Date of incorporation/qualification: _____ Document number: P04000075349

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

William B. Newsome

13938 Hwy 77

Southport, Fl. 32409

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

Connie F. Mettillie

214-A Business Park Drive

(P.O. Box NOT acceptable)

Lynn Haven, Florida 32444

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.

Michael P. Mettillie
(Signature of an officer or director)

Michael P. Mettillie

(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.

Connie F. Mettillie
(Signature of Registered Agent)

1/23/08
(Date)

If signing on behalf of an entity:

Connie F. Mettillie

(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

CR2E045 (8/05)

FILED STATE
SECRETARY OF CORPORATIONS
08 JAN 31 PM 3:40